

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **852507** (3)

1. Corporation Name
NEELS COMPANY, INC.



Principal Place of Business
FUNDORA
C/O TAMARA C. IGLESIAS
1040 N.W. 4TH ST., #102
MIAMI FL 33128-1132

Mailing Address
FUNDORA
C/O TAMARA C. IGLESIAS
1040 N.W. 4TH ST., #102
MIAMI FL 33128-1132

2. Principal Place of Business

2a. Mailing Address
3060 NW Flagler Terr

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State
MIAMI - FL

23. Zip

28. Zip
33125

24. Country

29. Country
DADE

3. Date Incorporated or Qualified
04/08/1982

3a. Date of Last Report
01/25/1995

4. FEI Number
98-0041168

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability or intangible tax under s. 199.032, Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

FUNDORA
IGLESIAS, TAMARA C.
1040 N.W. 4TH ST., #102
MIAMI FL 33128

10. Name and Address of New Registered Agent

81. Name
TAMARA C. FUNDORA

82. Street Address (P.O. Box Number is Not Acceptable)
3060 NW Flagler Terr.

83. City

84. City
MIAMI

85. State
FL

86. Zip Code
33125

11. Pursuant to the provisions of Sections 607.3504 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0505, Florida Statutes.

SIGNATURE: **TAMARA C. FUNDORA** **Leann C. Guedes** **1/19/96**

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.
<p>12.1 NAME: PD ELSACA-SAUD, ENRIQUE</p> <p>12.2 STREET ADDRESS: 9200 S DADELAND BLVD 214</p> <p>12.3 CITY, STATE, ZIP: MIAMI FL SD</p> <p>12.4 NAME: H. DE ELSACA, NELLY</p> <p>12.5 STREET ADDRESS: 9200 S DADELAND BLVD 214</p> <p>12.6 CITY, STATE, ZIP: MIAMI FL</p>	<p>13.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.2 NAME: 3060 NW Flagler Terr</p> <p>13.3 STREET ADDRESS: Miami, FL-33125</p> <p>13.4 CITY, STATE, ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.5 NAME: 3060 NW Flagler Terr</p> <p>13.6 STREET ADDRESS: Miami, FL-33125</p> <p>13.7 CITY, STATE, ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.8 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.9 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.10 CITY, STATE, ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.11 NAME: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.12 STREET ADDRESS: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p>13.13 CITY, STATE, ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that this information is true and correct or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an addition, with an address.

SIGNATURE: **Leann C. Guedes** **1/19/96** **649-4705**

CR2E034 (12/95)