

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852507

FILED  
Mar 13, 2012  
Secretary of State

Entity Name: NEELS COMPANY, INC.

**Current Principal Place of Business:**

1172 S DIXIE HWY  
#360  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

1172 S DIXIE HWY  
#360  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

FEI Number: 98-0041168      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

QAHHAT, AMAL  
3600 NE 170TH ST  
APT #307D  
NORTH MIAMI BEACH, FL 33160 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HIRMAS DE ELSACA, NELLY  
Address: 6423 COLLINS AVE #1003  
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD  
Name: ELSACA SAUD, ENTIQUE  
Address: 6423 COLLINS AVE #1003  
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD  
Name: ELSACA HIRMAS, CLAUDIA  
Address: 6423 COLLINS AVE #1003  
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NELLY H DE ELSACA

PD

03/13/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date