

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 589058

1. Entity Name
AIA REAL ESTATE INVESTMENT CORPORATION

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90092 045 ***150.00

Principal Place of Business
1918 N. 44th Avenue
Hollywood, FL 33021

Mailing Address
Same

B0068196

2. Principal Place of Business
1918 N. 44th Avenue

3. Mailing Address
1918 N. 44th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Hollywood, Florida

City & State
Hollywood, Florida

4. FEI Number
59-1892926

Applied For
Not Applicable

Zip **33021** Country **Broward**

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

6. Name and Address of Current Registered Agent

Raymond C. Churchill
1918 N. 44 Street
Hollywood, FL 33021

7. Name and Address of New Registered Agent

Name **PHILIP J. GOUZE**

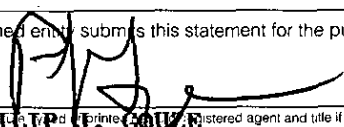
Street Address (P.O. Box Number is Not Acceptable)
500 S.E. Sixth Street

Suite 100 - Jay Mark Building

City **Fort Lauderdale** **FL** Zip Code **33301**

8. 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.

3/02/2000

SIGNATURE  **PHILIP J. GOUZE** Registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE **PRES** ☐ Delete
NAME **MANFRED PAUL NEUMANN**
STREET ADDRESS **Stadtplatz 80**
CITY-ST-ZIP **Muhldorf, Germany 84453**

TITLE **SECRETARY** ☐ Delete
NAME **GISELA NEUMANN**
STREET ADDRESS **Stadtplatz 80**
CITY-ST-ZIP **Muhldorf, Germany 84453**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 the 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

(954) 463-2995

Date

Daytime Phone #

Manfred Paul Neumann

CR2E034 (9/99)