

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000001497

1. Entity Name

IRMER INVEST, INCORPORATED

Principal Place of Business

C/O COMMONWEALTH LEGAL  
4701 COX RD., SUITE 301  
GLEN ALLEN VA 23060-6802  
US

Mailing Address

C/O GREGORY J SCHMIDT  
BEETHOVEN STR 24  
FRANKFURT GE D6-0325  
GE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

54-1313655

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

WHEATON, GEORGE N JR  
16860 FOX DEN SW  
FORT MYERS FL 33908

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

## 7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of 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, 2002 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00 May Be  
Added to Fees**

## 11. OFFICERS AND DIRECTORS

TITLE CPST  
NAME SCHMIDT, GREGORY J  
STREET ADDRESS BEETHOVENSTR 24  
CITY-ST-ZIP FRANKFURT GERMANY 60325

 Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

 Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

 Change  Addition

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.

04-49-69-

SIGNATURE: *Drenn J. Smith, Pres. Gregory J. Schmidt Pres.* 2/24/01 74309885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)