

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000008033

Entity Name: NEOCLAS, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

15860 SW 102ND PL
MIAMI, FL 33157

New Principal Place of Business:

P. O. BOX 2703
ST PETERSBURG, FL 33731

Current Mailing Address:

15860 SW 102ND PL
MIAMI, FL 33157

New Mailing Address:

P. O. BOX 2703
ST PETERSBURG, FL 33731

FEI Number: 20-0607924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENDALL, ANETTE
ONE BEACH DR SE
SUITE 303
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

KENDALL, ANETTE
P. O. BOX 514
ST. PETERSBURG, FL 33731 US

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: ANETTE KENDALL

04/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SCHWAB, STEPHAN
Address: 15860 SW 102ND PL
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: SCHWAB, STEPHAN
Address: P. O. BOX 2703
City-St-Zip: ST PETERSBURG, FL 33731

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: STEPHAN SCHWAB

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date