

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028306

FILED
Feb 17, 2010
Secretary of State

Entity Name: SCHUELE INVESTMENT, INC.

Current Principal Place of Business:

C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 20-2173590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCDONALD, SANDRA L VP OPER
C/O PROMED INSTRUMENTS
4529 SE 16TH PLACE, #101
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

MCDONALD, SANDRA L VP OPER
4529 SE 16TH PLACE
SUITE 101
CAPE CORAL, FL 33904 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: SANDRA L. MCDONALD

02/17/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR.
Name: SCHUELE, MATTHIAS E D
Address: AM DORFBACH 5A
City-St-Zip: FREIBURG IM BREISGAU, GERMANY, DE D-79111 DE

Title: MR.
Name: SCHUELE, CHRISTIAN D
Address: BOETZINGER STR. 38
City-St-Zip: FREIBURG IM BREISGAU, GERMANY, DE D-79111 DE

Title: MR.
Name: SCHUELE, THOMAS D
Address: BOETZINGER STR. 38
City-St-Zip: FREIBURG IM BREISGAU, GERMANY, DE D-79111 DE

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: SANDRA L. MCDONALD

VP

02/17/2010

Electronic Signature of Signing Officer or Director

Date