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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 30 AM 10:05

DOCUMENT # P08783 (3)

1. Corporation Name  
NATURAL ENERGY UNLIMITED, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
108 ROYAL STREET 108 ROYAL STREET  
NEW ORLEANS LA 70130 NEW ORLEANS LA 70130

3. Date Incorporated or Qualified 01/08/1986  
3a. Date of Last Report 03/29/1994

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

4. FEI Number 72-0902131  
Applied For Not Applicable

22 City & State 27 City & State

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

23 Zip 28 Zip

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

24 Country 25 Country 29 Country 30 Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
STACKHOUSE, SUSAN  
C/O FENTON HILL FLORIDA, INC.  
TAMPA INTERNATIONAL AIRPORT, LEVEL 3  
TAMPA FL 33607

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	PTD
NAME	MENUTIS, RUTH ANN
STREET ADDRESS	108 ROYAL STREET
CITY-ST-ZIP	NEW ORLEANS LA
TITLE	VSD
NAME	VALTEAU, PAUL
STREET ADDRESS	4000 DANNEEL STREET
CITY-ST-ZIP	NEW ORLEANS LA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an amendment with an addendum.

SIGNATURE: Susan Ruth Menutis 1-19-95 504/525-6887  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (System Form 9)