

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 11, 2001 8:00 am**  
**Secretary of State**

05-11-2001 90060 038 \*\*\*150.00

**DOCUMENT # P08783**

1. Entity Name  
**NATURAL ENERGY UNLIMITED, INC.**

Principal Place of Business <b>108 ROYAL STREET NEW ORLEANS LA 70130</b>	Mailing Address <b>108 ROYAL STREET NEW ORLEANS LA 70130</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address <b>3 Westbrook Corporate Center Suite 500</b>
City & State	City & State <b>Westchester, IL</b>

Zip	Country	Zip	Country
		<b>60154</b>	<b>US</b>

4. FEI Number **72-0902131** Applied For  
 Not Applicable

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



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**GAMBINI, KIM  
4588 CHURCH RD  
CALLAHAN FL 32011**

Name **Maria Ortiz**  
 Street Address (P.O. Box Number is Not Acceptable)  
**46 The Grove 9320 Airport Blvd. #B  
Orlando International Airport**  
 City **Orlando** FL Zip Code **32827**

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 *Maria Ortiz*  
 Signature, typed or printed name of registered agent, or title if applicable.

**4.24.01**  
 DATE

(NOTE: Registered Agent signature required when re-stating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 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**

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

TITLE	<b>PTD</b> <input type="checkbox"/> Delete
NAME	<b>MENUTIS, RUTH ANN</b>
STREET ADDRESS	<b>108 ROYAL STREET</b>
CITY-ST-ZIP	<b>NEW ORLEANS LA</b>
TITLE	<b>VSD</b> <input type="checkbox"/> Delete
NAME	<b>VALTEAU, PAUL</b>
STREET ADDRESS	<b>108 ROYAL ST</b>
CITY-ST-ZIP	<b>NEW ORLEANS LA 70130</b>
TITLE	<b>C/O</b> <input type="checkbox"/> Delete
NAME	<b>DUKLER, MARTIN</b>
STREET ADDRESS	<b>3 WESTBROOK CORP. CENTER, SUITE 500</b>
CITY-ST-ZIP	<b>WESTCHESTER, IL 60154</b>
TITLE	<b>V</b> <input type="checkbox"/> Delete
NAME	<b>IRELAND, ROBERT</b>
STREET ADDRESS	<b>3 WESTBROOK CORP. CENTER, SUITE 500</b>
CITY-ST-ZIP	<b>WESTCHESTER, IL 60154</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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: *Ruth Ann Menutis*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**RUTH ANN MENUTIS**

**4-23-01**  
 Date

**504-525-6887**  
 Daytime Phone #

CR2E034 (10/00)