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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072796

1. Corporation Name

DR. VON KAPFF & DR. RUOFF INVESTMENT, INC.

Principal Place of Business

Mailing Address

DR VON KAPFF & DR RUOFF INV INC.
1022 DOLPHIN DR
CAPE CORAL FL 33904
US

DR VON KAPFF JM KELTENGARTEN
D-72070 TUEBINGEN
GERMANY
GR

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1993

4. FEI Number

65-0443174

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOYKE, GISELA
1907 SE 35TH ST
CAPE CORAL FL 33904

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME RUOFF, FRIEDEMANN D

STREET ADDRESS WINTERGRASSE 6

CITY-ST-ZIP 72414 RANGENDINGEN GERMANY GR

TITLE DP ☐ DELETE

NAME VON KAPFF, THOMAS

STREET ADDRESS JM KELTERNGARTEN 27

CITY-ST-ZIP D-72070 TUEBINGEN GERMANY GR

TITLE ☐ DELETE

NAME Dr. Thomas von Kapff & Dr. Friedemann Ruoff
Investment Inc.
Im Keltengarten 27

TITLE ☐ DELETE

NAME Im Keltengarten 27

STREET ADDRESS Telefon 07071/763462 Fax 07071/763465

CITY-ST-ZIP 72070 Tübingen

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER

Date

Daytime Phone #

CR2E034 (11/98)