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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Jun 06 1996 8:00 am  
Secretary of State

DOCUMENT # P94000021138 (0)

1. Corporation Name

KWUB INTERNATIONAL INVESTMENTS, INC.



Principal Place of Business

Mailing Address

4365 OKEECHOBEE BLVD.  
SUITE B10  
WEST PALM BEACH FL 33409

4365 OKEECHOBEE BLVD.  
SUITE B10  
WEST PALM BEACH FL 33409

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
03/18/1994

3a. Date of Last Report  
01/25/1995

4. FEI Number

65-0473369

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

KEIL, WOLFGANG  
4365 OKEECHOBEE BLVD.  
SUITE B10  
WEST PALM BEACH FL 33409

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

TITLE PTD  
NAME KEIL, WOLFGANG  
STREET ADDRESS 4365 OKEECHOBEE BLVD. SUITE B10  
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE VSD  
NAME KEIL, BRIGITTE  
STREET ADDRESS 4365 OKEECHOBEE BLVD. SUITE B10  
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE D  
NAME KEIL, ULRKE  
STREET ADDRESS 4365 OKEECHOBEE BLVD. SUITE B10  
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE D  
NAME KEIL, KLAUS  
STREET ADDRESS 4365 OKEECHOBEE BLVD. SUITE B10  
CITY-ST-ZIP WEST PALM BEACH FL 33409

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 PRESIDENT  
1.2 NAME FRGO KELLER  
1.3 STREET ADDRESS 4365 OKEECHOBEE BLVD SUITE B10  
1.4 CITY-ST-ZIP WEST PALM BEACH, FLA. 33409

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

W. Keil

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/96 407-686-9911

Date

Daytime Phone #

CR2E034 (12/95)