## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 09 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P94000 CORPORATION	0044005 (4)			
Principal Plac	ce of Business	Mailing Address			FIER OF SHE EDIN DOIO! SIN 1881
4745 ESTERO BLVD APT. 1202 FORT MYERS BEACH FL 33931 US		6051 ESTERO BOULEVARD SUITE 103 FT MYERS BEACH FL 33831 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		06/08/1994 4. FEI Number	Applied For
21		26		65-0535229	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	e 	City & State		B. Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
£4	9. Name and Address of Current		30]	10. Name and Address of New Registere	
.IO	HN C. DAVIS, CPA		81 Name		
•	51 ESTERO BLVD		82 Street Add	dress (P.O. Box Number is Not Acceptable)	<del></del>
	MYERS BEACH FL 33931			Too (Fig. 20) Hamber to No. 7 too place,	
			83		
			B4 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607,1508. Florida Statute	s the above-named cor		
office or r agent. I a SIGNATURE	registered agent, or both, in the State of im familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.05 <b>05</b> , Flo	uthorized by the corpora rida Statutes.	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
	Signature, typed or printed name of registered agen		: Registered Agent signature requ		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D CEICCLED CUDICTIAN	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	GEISSLER, CHRISTIAN MEIERHALTWEG 17		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	D77886 LAUF, GERMANY		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	GEISSLER, BRIGITTE		22 NAME		
STREET ADDRESS	MEIERHALTWEG 17		2.3 STREET ADDRESS	्रेट के किया है। जिल्हा	
CITY-ST-ZIP	D77886 LAUF, GERMANY		2. 4 CITY-ST-ZIP		
TITLE	D	☐ DELE <b>te</b>	3.1 TITLE		Change Addition
NAME	GEISSLER, ARNE		3.2 NAME		
STREET ADDRESS	WINGERTSTR. 43E		3.3 STREET ADDRESS		
CITY-ST-ZIP	D63322 ROEDERMARK GE	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE NAME	D Geissler, andreas	- Detere	4.1 IIILE 4.2 NAME		Cuange E Violiton
STREET ADDRESS	GARMISCHER ALLEE 40		4.3 STREET ADDRESS		
CITY-ST-ZIP	D 86438 KISSING GE		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELET <b>E</b>	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CfTY-ST-ZIP		1

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied that 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 opporation or the receiver or trustle empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ganged, or in an attachment with an address.