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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000025481 (9)

VERBUND USA REALTY INC.

Principal Place	e of Business	Mailing Address	···		(d)	
904 LEE BLVD SUITE 111 LEHIGH ACRES FL 33896		904 LEE BLVD Suite 111 Lehigh Acres FL 33936				
				3. Date Incorporated or Qualified 03/29/1995	3a. Date of Last Report 05/01/1996	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0573970	Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
27				Fee Required		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for		
24	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Curr	ent Registered Agent	04 1	10. Name and Address of New F		
	FFER, JOHANN M		81 Name	PFEIFFER JOH	ANNM	
1021 3				Address (P.O. DOX NUMBER IS NOT ACCEPTADIE)		
SUITE 103				904 LEE BLV	Q	
LEHIGH ACRES FL 33936			83	83 SUITE 111		
			84 City	LEHIGH	FL 85 Zip Code 33936	
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Starn familiar with, and accept the ob-	ate of Florida. Such change was	authorized by the corp	corporation submits this statement for the oration's board of directors. I hereby acc	purpose of changing its registered	
l	The annual war, and accept the ob	ilganorio or occion cos book, i	ionad Oldiacos.			
SIGNATURE	Signature, lyped or printed name of registered	agent and lifte if applicable (NC	D1E: Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12	
TITLE	D	▼ DELETE	1.1 TITLE	P	Change 🛂 Addition	
NAME	PFEIFFER, JOHANN M		1.2 NAME	PATRICIA A. REGA 904 LEE BLVD S	S	
STREET ADDRESS	904 LEE BLVD STE 111		1.3 STREET ADDRESS			
CITY-ST-ZIP	LEHIGH ACRES FL 33936		1.4 C(TY - S1 - Z(P	LEHIGH, FL 3.		
TITLE		☐ DELETE	2.1 THTLE	210	Change Addition	
NAME			2.2 NAME	GRACE G. EVASC	0 -	
STREET ADDRESS			2.3 STREET ADDRESS	904 LEE BLVD	STEILL	
CITY-ST-ZIP			2.4 CHY-S1-ZIP	LEHIGH, FL 33	. 936	
TITLE		L DELETE	317/JLE		Change Addition	
NAME			3 2 NAME		\	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. C(TY - ST - Z(P		Change Addition	
TITLE		LJ ULLETE	4.1 TOLE		E Change E Aboution	
NAME			4. 2 NAME.		}	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 DITY - ST - ZIP		Change Addition	
1		LJ butt	51 TITLE	•	Li Onange Li Addition	
NAME CORRECT APPROACE			5.2 NAME			
STREET ADDRESS			5.3 BTREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	6.4 PHY-ST-ZIP		Change Addition	
}					Change C Addition	
NAME PROCES ADDRESS			6.2 NAME			
STREET ADDRESS			6.3 \$TREET ADDRESS			

14. I do 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 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 conjugation 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, on an attachment with an address

PIETER DOUANN

CICMATURE.

4/28/97 941 369 2585

FILED

May 08 1997 8:00am

Secretary of State