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FILED  
Mar 26 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000034236 (6)

1. Corporation Name  
COMMERZ INVESTMENTS CORPORATION



Principal Place of Business  
140 EL DORADO PARKWAY SW  
CAPE CORAL FL 33914

Mailing Address  
140 EL DORADO PARKWAY SW  
CAPE CORAL FL 33914-7172

3. Date Incorporated or Qualified  
04/25/1995

3a. Date of Last Report  
03/14/1996

2. Principal Place of Business  
21 5214 Sunset Court  
State, Apt. #, etc.

2a. Mailing Address  
26 % Lydia Thiersmann  
State, Apt. #, etc.

4. FEI Number  
65-0578983

Applied For  
Not Applicable

22 City & State  
23 Cape Coral, FL  
Zip Country

27 1317 SE 46th Lane #204  
City & State  
28 Cape Coral, FL  
Zip Country

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

24 33904-5865

25

29 33904-8624

30 U.S.A.

9. Name and Address of Current Registered Agent

SHULTZ, RUSSEL  
140 EL DORADO PARKWAY SW  
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

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 of person who is the registered agent and file if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME D PESCH, HELMA  
STREET ADDRESS 140 EL DORADO PARKWAY SW  
CITY-STATE-ZIP CAPE CORAL FL 33914  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
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TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME P Pesch, Helma  
1.3 STREET ADDRESS 5214 Sunset Court  
1.4 CITY-STATE-ZIP CAPE CORAL, FL 33904-5865  
2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME D Lydia Thiersmann  
2.3 STREET ADDRESS 1317 SE 46th Lane #204  
2.4 CITY-STATE-ZIP CAPE CORAL, FL 33904-8624  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

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 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:

Lydia Thiersmann  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/97  
Date

941-549-4262  
Daytime Phone #

CR2E034 (9/96)