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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000083116 (0)**

1. Corporation Name

COLOGNE INVESTMENT, INC.

Principal Place of Business	Mailing Address
400 FIFTH AVENUE SOUTH #300 NAPLES FL 33940	400 FIFTH AVENUE SOUTH #300 NAPLES FL 33940

3. Date Incorporated or Qualified: **10/26/1995**
3a. Date of Last Report:
4. FEI Number: **65-0630000** ☐ 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

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent

GUDRUN MARIA NICKEL, P.A.
350 FIFTH AVENUE SOUTH #200
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name: Rainer Filthaut
82 Street Address (P.O. Box Number is Not Acceptable): 400 Fifth Ave. South, #300
83
84 City: Naples FL 85 Zip Code: 33940

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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] Rainer H. Filthaut, Vice President 1/16/96
Signature, Typed or Printed Name of Individual with Authority to Sign, Capacity/Title (if applicable) Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
NAME	JONDRAL, INGRID		1.2 NAME
STREET ADDRESS	AM KLIEPESCH 13A		1.3 STREET ADDRESS
CITY-ST-ZIP	D-50859 KOELN GERMANY		1.4 CITY-ST-ZIP
TITLE	VD	☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
NAME	JONDRAL, MANFRED		2.2 NAME
STREET ADDRESS	AM KLIEPESCH 13A		2.3 STREET ADDRESS
CITY-ST-ZIP	D-50859 KOELN GERMANY		2.4 CITY-ST-ZIP
TITLE		☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE		☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			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		☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			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: [signature] 3/17/96 (941) 4250247
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)