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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000014907 (5)

NIETZER INTERNATIONAL CO.

Principal Place of Business Mailing Address 100 N. BISCAYNE BLVD., STE. 3000 MIAMI FL 33132 100 N. BISCAYNE BLVD., STE. 3000 MIAMI FL 33132-2305 3. Date Incorporated or Qualified 3a. Date of Last Report 02/14/1996 2. Principal Place of Business 2a. Mailing Address 4. EEI Number Applied For 650643863 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HEYDASCH, AXEL 81 Name 100 N. BISCAYNE BLVD., STE. 3000 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33132** 83 84 City 85 Zip Code orda Statutes, the above named corporation submits this statement for the purpose of changing its registered lingo has authorized by the corporation's board of directors. I hereby accept the appointment as registered of USAs, Florida Statutes. 11. Pursuant to the prov office or registered agent. I am familia SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE TITLE 1.1 1111.6 Change Addition NIETZER, WOLF M NAME 1.2 NAME 100 N. BISCAYNE BLVD., STE. 3000 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33132 CITY-ST-ZIP 1.4 C(1Y - S1 - Z(P DELETE TITLE 2.1 THLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 DITY-ST-ZIP DELETE TITLE Change Addition 311011 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE ____ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELFTE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

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 received or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 130 chapter 607 or an attriction of the corporation of

MM Nietza

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

an address.

FILED Apr 21 1997 8:00am Secretary of State

(96/6)