

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

FILED  
Mar 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000021340 (9)

1. Corporation Name

AMEUREX CORP.



Principal Place of Business

3400 S. TAMiami TRIAL  
SUITE 303  
SARASOTA FL 34239

Mailing Address

3400 S. TAMiami TRIAL  
SUITE 303  
SARASOTA FL 34239

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1997

4. FEI Number

59-3431817

Applied For

Not Applicable

2. Principal Place of Business

21 1906 SE 40th Street

Suite, Apt. #, etc.

22

City & State

23 Cape Coral, FL

Zip

24 33904

Country

25 Lee

2a. Mailing Address

26 Lydia Thiersmann

Suite, Apt. #, etc.

27 1317 SE 46th Lane #207

City & State

28 Cape Coral, FL

Zip

29 33904-862430

Country

Lee

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JAENSCH, P. CHRISTOPHER  
3400 S. TAMiami TRIAL  
SUITE 303  
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name

Lydia Thiersmann

82 Street Address (P.O. Box Number is Not Acceptable)

1317 SE 46th Lane #207

83

84 City

Cape Coral

FL

85 Zip Code  
33904

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 *Lydia Thiersmann* Lydia Thiersmann

03-16-1998

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
HILLEBRANDT, FRIEDRICH W  
STREET ADDRESS MARIATROSTER STRASSE 131 Graz  
CITY-ST-ZIP AUSTRIA

TITLE ☐ DELETE

NAME D  
NIEDERBERGER, RAINER J  
STREET ADDRESS MARIATROSTER STRASSE 131  
CITY-ST-ZIP AUSTRIA

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP 8043 Graz, Austria

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP 8043 Graz, Austria

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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

*Niederberger*

3-16-98

CR2E034 (10/97)