FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Feb 25, 2002 8:00 am Secretary of State

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DOCUMENT # P9800	02-25-2002 90035 013 ***150.00				
German-Florida	Investmen	nts Corp.			
DO NOT WRITE	IN THIS SP	ACE			
2. Principal Place of Business 2/28SW 47th Terrace	3. Mailing Address	7th Terrace			
ZIZOSW 4 IM TETTALE	2/28JW 4 Suite, Apt. #, etc.	in lettuce	DO NOT WRIT	TE IN THIS SPACE	
Cape Coral, FL	Ca pe Cora	LFL	4. FFI Number 65022785	Applied For Not Applicable	,
7io - Country	33914	Country A	5. Certificate of Status Desired	\$8.75 Additional	7
33914 USA	33314	ACCUPACION AND A		Fee Required	_
		Name	7. Name and Address of Current		
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IN THIS SPA	KCE		1.7.7	, <u></u>	1
		City On A	a Ca and	FL 73914	\dashv
		$\omega - \omega \rho$			
8. The above named entity submits this statement for the	ne purpose of changing its e	gistered office of register	ed agent, both, in the State of Flo	rida.	
SIGNATURE Dr. Tuergen Har Signature, typical printed norm of registered agent and	tive of applicable. (NOTE: R	tegisy ed Agent signature required	when reinstaing)	117/02	
9. This corporation is eligible to satisfy its Intangible	January 1 May	vil ee is \$150.00	7.0		1
Tax filing requirement and elects to do so. (See criteria on back)	After May 1, Amended 1 Make Check Payable	Fee is \$550.00 UBR is \$61.25 to Department of Stat	10. Election Campaign Fin Trust Fund Contribution		
11. OFFICERS AND DI	RECTORS		Contac as a Section Contact		4 _
TOTAL TOTAL	L	time to			5
NAME TOTSEN JOSUPET	renue	NAME Street Address			
CITY-ST-ZIP COOP COPOL FL3	3314	CITY:ST-ZIPEC # 1000			CR2E034B (12/01
TIME DIVIS	.t.la	tilite			25 25 27
NAME Or Juegen Hartu	ICAI	NAME			3
STREET ADDRESS ZIZB SW 47th Tel	2011	STREET ADDRESS			
time cape Coral, rl 3	2314	TITLE			
NAME		NAME			
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CIIY-ST-ZIP		CITY ST ZION		and the second second	劉 類
TITLE NAME		NAME	IN THIS S	SPACE : * * * :	
STREET ADDRESS		STREET ADDRESS			
CITY - ST-2IP		CITY ST ZIP			
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NAME STREET ADDRESS		NAME STREET ADDRESS			
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TITLE		TITLE 18 STORY			N.
NAME STREET ANDRESS		NAME			N. C.
STREET ADDRESS CITY-ST-7IP		STREET ADDRESS CITY STEPP			
49. I boroby gorific that the information equaling with the	is filing does not qualify for th	o avamation stated in Sa	ction 119.07(3)(i), Florida Statutes. I	further certify that the information	"
indicated on this report or supplemental report is true of the corporation or the receiver or trustee empow attachment with an address, with all other like empowers.	ue and accurate and that my rered to execute this resort a	signature shall have the s as required by Chapter 60	same legal effect as if made under or 07, Florida Statutes; and that my nar	ath; that I am an officer or director me appears in Block 11 or on an	
attachment with an address, with all other like empo	overed		_		1
SIGNATURE:	1 Nh	_ (01/17/02	941-541-0171	
SIGNA WIRE AND TOPED OF PRIN	TED NAME OF SIGNING OFFICER OR	DIRECTOR	Date	Daytime Phone #	