2003 FOR PROFIT CORPORATION \ UNIFORM BUSINESS REPORT (UBR

P98000093302 **DOCUMENT #**

1. Entity Name

IEUTONIA PROPERTIES INC.

Principal Place of Business 5004 SOUTHWEST 25TH COURT CAPE CORAL FL 33914 Mailing Address 5004 SOUTHWEST 25TH CAPE CORAL FL 33914						191 AAC 14 WUIII W O IP	6 16166 (11 86 51) L	88118 INC. (88)
2. Principal Place of Business 3. Mailing Address			, . <u></u>] ''	1981/891 18 1818: 6 14 BE	140 6 1 440 4 1 041 6 1 41	B 10160 31105 11411	80118 1181 1891
Suite, Apt. #, etc. Suite, Apt		Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State City		ty & State		4. FEI Number 65-0874379			Applied For Not Applicable	
Country	Zip	Coun	try	5. Certific	cate of Status Desire	ed 🔲	\$8.75 Ad	ditional
6. Name and Address of Current F	egistered Agent			7. Name	and Address of Ne	w Registered		-
			Name					
•	· · · · · · · · · · · · · · · · · · ·		Street Address	PO Box Nu	mber is Not Accept	able)		
/S STREET			Chroti Addioso	(1.0. DOX 110	amber is thet Accept	abic)		
SSEE FL 32301-2525								
			City			FI	Zip Cod	e
e named entity submits this statement for	the nurpose of changing	its registere	ed office or registe	red acent of	r hoth in the State o		_	and accept
tions of registered agent.	the perpendict and igning	na regiotore	a onice of registe	rea agent, or	, poin, in the otate o	in ionoa. Tan	riairmai witii,	and accept
Signature, typed or printed name of registered agent an	d title if applicable. (Ne	OTE: Registered	Agent signature required	d when reinstating	 g)	DATE		
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	'			9.		_		0 мау Ве
	State -				Trust Fund Contrib	ution.	لل Added	t to Fees
OFFICERS AND D	IRECTORS	11.		ADDITIO	NS/CHANGES TO	OFFICERS AN	D DIRECTOR	S IN 11
D	☐ Delete	TITLE				••		Addition
BECKER, WERNER		NAME	:				_ ,	
45 JAKOB-KAISER-WEG, D-42111		STREE	T ADDRESS					
WUPPERTAL, GERMANY		CITY-	ST-ZIP					
D	☐ Delete	TITLE					☐ Change	☐ Addition
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		CITY-	SI-ZIP					
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INIPINIALIS PRANZ			1 ,				☐ Change	Addition
18 HOHENZOLI EDNSTD D-42297		NAME					Change	Addition
18 HOHENZOLLERNSTR, D-42287	,	STREE	T. ADDRESS				Change	Addition
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	Place of Business #, etc. tee Country 6. Name and Address of Current R ATION SERVICE: COMPANY SSTREET SSEE FL 32301-2525 e named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent and tions of registered agent. Signature, typed or printed name of registered agent and tions of registered agent. DELE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of SOFFICERS AND DOBECKER, WERNER 45 JAKOB-KAISER-WEG, D-42111 WUPPERTAL, GERMANY D HORN, ULRIKE 45 JAKOB-KAISER-WEG, D-42111 WUPPERTAL, GERMANY D	Suite, Apt. #, etc. City & State	Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. Signature, typed or printed name of registered agent and title if applicable. 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Name and Address of Current Registered Agent Name ATION SERVICE: COMPANY STREET SSEE FL 32301-2525 City a named entity submits this statement for the purpose of changing its registered office or registe tions of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requires to Florida Department of State OFFICERS AND DIRECTORS D BECKER, WERNER 45 JAKOB-KAISER-WEG, D-42111 WUPPERTAL, GERMANY D D Delete TITLE NAME STREET ADDRESS CITY-SI-ZIP D Delete TITLE NAME NAME STREET ADDRESS CITY-SI-ZIP D Delete TITLE NAME NAME STREET ADDRESS CITY-SI-ZIP D Delete TITLE NAME	WEST 25TH COURT LFL 33914 CAPE CORAL FL 33914 Place of Business 3. Mailing Address 3. Mailing Address 3. Mailing Address 4. FEI Ni Tountry Tip Country Tip Country Tip Country Tountry Tou	WEST 25TH COURT F. PL 33914 Southwest 25TH COURT CAPE CORAL FL 33914 Place of Business 3. Mailing Address #, etc. CHECK Hi Country Zip Country 5. Certificate of Status Desir 65-0874 Country Zip Country 5. Certificate of Status Desir 6. Name and Address of Current Registered Agent 7. Name and Address of New ATION SERVICE: COMPANY S STREET SSEE FL 32301-2525 City Street Address (P.O. Box Number is Not Accept City Status Desired Agent In the State of City Status Desired Agent In the State of City Status Desired Address (P.O. Box Number is Not Accept City Street Address (P.O. Box Number City Street Addres	WEST 25TH COURT F. E. 33914 CAPE CORAL FL 33914 A Mailing Address 3. Mailing Address #, etc. CHECK HERE IF MAKIN te City & State 4. FEI Number 65-0874379 Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ATION - SERVICE : COMPANY Street Address (P.O. Box Number is Not Acceptable) STREET Street Address (P.O. Box Number is Not Acceptable) City File City File a named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am tions of registered agent NoTE Registered Agent signature required when renatating) DATE **REE NOW!!! FEE IS \$150.00 Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Delete TITLE NAME SIRRET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIRRET ADDRESS CITY-ST-ZIP CITY SIRRET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIRRET ADDRESS CITY-ST-ZIP CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY CITY	WEST 25TH COURT CAPE CORAL FL 39914 Place of Business 3. Mailing Address #, etc. CHECK HERE IF MAKING CHANGES te City & State 4. FEI Number 65-0874379 A No. No.

CITY-ST-ZIP

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2120]

FILED

Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90234 047 ***150.00

Daytime Phone #