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Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V40395 (8)

1. Corporation Name
REEL GOLD, INC.

Principal Place of Business
% GOZZO ESTATE HOMES
9121 N MILITARY TRAIL SUITE 216
PALM BEACH GARDENS FL 33410
US

Mailing Address
THE MEETZE COMPANY
P.O. BOX 350
ROGERSVILLE MI 65742-0350
US



2. Principal Place of Business
21 ZEEBINK #839
Suite, Apt. #, etc.

2a. Mailing Address
26 JAME AS ABOVE
Suite, Apt. #, etc.

22 City & State
23 Knokke-Zoute

27 City & State

24 Zip 8300 25 Country Belgium

28 Zip 30 Country

3. Date Incorporated or Qualified
06/02/1992

3a. Date of Last Report
10/16/1996

4. FEI Number
65-0338962
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRISENDA, NANCY
747 S.W. SOUTH MACEDO BLVD.
PORT ST. LUCIE FL 34983

81 Name

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

83

84 City

FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME ZWAANS, RUUD
STREET ADDRESS 12150 BROOKMILL PT.
CITY - ST - ZIP ALPHALETTA GA 30201

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE D
NAME ZWAANS, ROCHELLE
STREET ADDRESS 12150 BROOKMILL PT.
CITY - ST - ZIP ALPHALETTA GA

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE SD
NAME MEETZE, JAMES R
STREET ADDRESS 4789 SO FARM RD
CITY - ST - ZIP RODGERSVILLE MO

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 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:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-07 11-2-002 2511

CR2E034 (9/96)