

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90277 017 \*\*\*150.00

**DOCUMENT # F01000000080**

1. Entity Name  
 BMW (US) HOLDING CORP.



Principal Place of Business  
 300 CHESTNUT RIDGE ROAD  
 WOODCLIFF LAKE, NJ 07677

Mailing Address  
 P.O. BOX 1227  
 ATTENTION: TAX DEPT  
 WESTWOOD, NJ 07675-1227

20046684



04142005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 22-2013053	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO PURVES, THOMAS F.G. 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HAGEMANN, ROLF 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HELISING, CRAIG 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NELLEN, MARTIN 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HELFMAN, DENNIS F 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WIECZOREK, FRANK 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677

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12. 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: Frank Wiczorek 4/14/05 (201) 307-3655

Frank Wiczorek/Asst.Sec.