

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 10, 2002 8:00 am**  
**Secretary of State**

04-10-2002 90665 026 \*\*\*150.00

**DOCUMENT #** FO1000004628  
1. Entity Name Ligeo America, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <u>3225 Mil Armstrong Blvd.</u>		3. Mailing Address <u>Same as #2</u>	
Suite, Apt. #, etc. <u># 800</u>		Suite, Apt. #, etc.	
City & State <u>Essex, NV</u>		City & State	
Zip <u>89201</u>	Country <u>Dakota</u>	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>41-1920002</u>		Applies Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

<b>DO NOT WRITE IN THIS SPACE</b>				7. Name and Address of Current Registered Agent			
				Name <u>NRAS Services Inc.</u>			
				Street Address (P.O. Box Number is Not Acceptable) <u>526 E. Park Avenue</u>			
				City <u>Tallahassee</u>		FL	Zip Code <u>32301</u>

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>See attached</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Greg DeWeese 3/28/02 651-686-9080  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Attachment  
D#FO1000004628  
BOX 4175

Lisec America, Inc.  
Officers, Directors & Shareholders

**Officers:**

President Hubert Haselsteiner 3225 Neil Armstrong Blvd., #800, Eagan, MN 55121  
Vice President Greg DeWeese 3225 Neil Armstrong Blvd., #800, Eagan, MN 55121

**Directors:**

Chairman Peter Lisec 34 Bahnhofstrasse, A-3363 Hausmening-Amstetten, Austria  
~~Director Hubert Haselsteiner 3225 Neil Armstrong Blvd., #800, Eagan, MN 55121~~  
Director Gerhard Sonnleitner 34 Bahnhofstrasse, A-3363 Hausmening-Amstetten, Austria