

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004628

FILED
Mar 30, 2004
Secretary of State

Entity Name: LISEC AMERICA, INC.

Current Principal Place of Business:

3225 NEIL ARMSTRONG BLVD
#800
EAGAN, MN 55121

New Principal Place of Business:

Current Mailing Address:

3225 NEIL ARMSTRONG BLVD
#800
EAGAN, MN 55121

New Mailing Address:

FEI Number: 41-1920002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HASELSTEINER, HUBERT
Address: 3225 NEIL ARMSTRONG BLVD., #800
City-St-Zip: EAGAN, MN 55121

Title: V () Delete
Name: DEWEESE, GREG
Address: 3225 NEIL ARMSTRONG BLVD., #800
City-St-Zip: EAGEN, MN 55121

Title: C () Delete
Name: LISEC, PETER
Address: 34 BAHNHOFSTRASSE
City-St-Zip: A-3363 HASSIMENING AUSTRALIA, AU A-3363

Title: D () Delete
Name: SONNLEITNER, GERHARD
Address: 34 BAHNHOFSTRASSE
City-St-Zip: A-3363 HASSIMENING AUSTRALIA, AU A-3363

Title: D () Delete
Name: HUBERT, HASELSTEINER
Address: 3225 NEIL ARMSTRONG BLVD
City-St-Zip: EAGAN, MN 55121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: DEWEESE, GREG
Address: 3225 NEIL ARMSTRONG BLVD., #800
City-St-Zip: EAGAN, MN 55121

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG DEWEESE

V

03/30/2004

Electronic Signature of Signing Officer or Director

_____ Date