

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004628

Entity Name: LISEC AMERICA, INC.

FILED
Apr 12, 2011
Secretary of State

Current Principal Place of Business:

12571 OLIVER AVE SO
#100
BURNSVILLE, MN 55337

New Principal Place of Business:

Current Mailing Address:

12571 OLIVER AVE SO
#100
BURNSVILLE, MN 55337

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.
515 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: QUAIST, BOB
Address: 12571 OLIVER AVE SO #100
City-St-Zip: BURNSVILLE, MN 55337

Title: VP
Name: HOENIG, HANS
Address: 12571 OLIVER AVE SO #100
City-St-Zip: BURNSVILLE, MN 55337

Title: DIR
Name: SONNLEITNER, GERHARD
Address: 34 BAHNHOFSTRASSE
City-St-Zip: HAUSMENING-ANSTETTEN, AU A-3363 AU

Title: DIR
Name: QUAIST, BOB
Address: 12571 OLIVER AVE SO, #100
City-St-Zip: BURNSVILLE, MN 55337

Title: DIR
Name: BLOCHLINGER, ERNST
Address: HERRENGASSE 21 POSTFACH 339
City-St-Zip: VADUZ, LI 9490 LI

I hereby 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 all other like empowered.

SIGNATURE: BOB QUAIST

_____ Electronic Signature of Signing Officer or Director

PRES

04/12/2011

_____ Date