2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2003
Secretary of State

DOCUMENT# F98000007149

Entity Name: LINDE LIFT TRUCK CORP.

Current Principal Place of Business:

2450 W 5TH NORTH STREET
SUMMERVILLE, SC 29484

New Principal Place of Business:

Current Mailing Address:

PO BOX 2400
SUMMERVILLE, SC 29484

New Mailing Address:

FEI Number: 57-1075851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MILOVICH, MITCHELL
Address: 2450 W 5TH NORTH STREET
City-St-Zip: SUMMERVILLE, SC

Title: VST ( ) Delete
Name: NOWICKI, JURGEN
Address: 2450 W 5TH NORTH STREET
City-St-Zip: SUMMERVILLE, SC

Title: CD ( ) Delete
Name: MEGERLIN, FERDI
Address: 2450 W 5TH NORTH STREET
City-St-Zip: SUMMERVILLE, SC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VST (X) Change ( ) Addition
Name: SCHNESE, CARSTEN
Address: 2450 W 5TH NORTH STREET
City-St-Zip: SUMMERVILLE, SC

Title: CD (X) Change ( ) Addition
Name: BROCKMOSER, ERWIN
Address: 2450 W 5TH NORTH STREET
City-St-Zip: SUMMERVILLE, SC

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: CARSTEN SCHNESE VST 07/09/2003

Electronic Signature of Signing Officer or Director — Date