

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000017351

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: GERMAN CONSULT CORPORATION

**Current Principal Place of Business:**

6875 WILLOWWOOD DR. #2081  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

6725 EAGLE RIDGE DR  
WEST PALM BEACH, FL 33413

**New Mailing Address:**

FEI Number: 65-0835772      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROCKMANN, FRIEDRICH W  
6725 EAGLE RIDGE DR  
WEST PALM BEACH, FL 33413      US

**Name and Address of New Registered Agent:**

BROCKMANN, FRIEDRICH W  
1970 NE 35 ST  
LIGHTHOUSE POINT, FL 33064      US

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: \_\_\_\_\_ 04/25/2008  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOCHNIG, NICOLE  
Address: 6875 WILLOWWOOD DR., #2081  
City-St-Zip: BOCA RATON, FL 33434

Title: VPTD ( ) Delete  
Name: LINDEN, PATRICK W  
Address: 6875 WILLOWWOOD DR., #2081  
City-St-Zip: BOCA RATON, FL 33434

Title: S ( ) Delete  
Name: BROCKMANN, FRIEDRICH W  
Address: 6875 WILLOWWOOD DR., #2081  
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete  
Name: LINDEN, UTE  
Address: 6875 WILLOWWOOD DR., #2081  
City-St-Zip: BOCA RATON, FL 33434

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 exemption stated in Chapter 119, 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: FRIEDRICH W BROCKMANN      S      04/25/2008  
Electronic Signature of Signing Officer or Director      Date