2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006186

FILED Feb 25, 2008 Secretary of State

Entity Name: JOHANN KOLLER LIEGENSCHAFTSVERWALTUNGS GMBH INC.

Current Principal Place of Business:		e of Business:	New Principal Place of Business:	
BEACH				
SUITE 220) RSBURG, FL	33701		
	•		Name Balaine	
urrent iv	lailing Addre	SS:	New Mailing Addres	SS:
BEACH SUITE 220 ST PETER		33701		
El Number	: 98-0556783	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
OERR, (BEACH SUITE 22(ST PETER	DR. S.E.	33701 US		
he above		submits this statement for the	purpose of changing its registere	ed office or registered agent, or both
he above the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both
he above the Stat	e of Florida.			ed office or registered agent, or both
he above the Stat	e of Florida. RE: Electro	submits this statement for the particle of Registered Aging Trust Fund Contribution ().		ed office or registered agent, or both Date
The above the Stat SIGNATU	e of Florida. RE: Electro	nic Signature of Registered Ag	ent	
The above the Stat SIGNATU	e of Florida. RE: Electro mpaign Financir S AND DIREC CHRM (KOLLER, JOH 1 BEACH DR.	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete	ent	Date
The above in the State SIGNATU SIGNATU SIECTION Ca DFFICER itle: lame: ddress:	e of Florida. RE: Electro mpaign Financir S AND DIREC CHRM (KOLLER, JOH 1 BEACH DR. ST PETERSBU PTD (KOLLER, JOH 1 BEACH DR.	nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete IANN S.E., SUITE 220 JRG, FL 33701) Delete	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: KOLLER, JOHANN CHRM 02/25/2008