## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## 02-22-2005 90019 029 \*\*\*158.75 **DOCUMENT # 514557** 1. Entity Name SWISS & GERMAN INVESTMENTS, INC. 40021124 Principal Place of Business Mailing Address 326 GRANDVIEW AVENUE 326 GRANDVIEW AVENUE DAYTONA BEACH, FL 32015 DAYTONA BEACH, FL 32015 3. Mailing Address 2. Principal Place of Business 12177 SE 91st Ave. 12177 SE 91st Ave. Suite, Apt. #, etc Suite, Apt. #, etc. 02032005 Chq-P CR2E034 (10/03) 4. FEI Number City & State City & State Applied For Summerfield, Summerfield, FL59-1866102 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired $\Box$ 34491 Fee Required 34491 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Horst G Hisam JOHNSON, RONALD Street Address (P.O. Box Number is Not Acceptable) 12177 SE 91st Ave. 326 GRANDVIEW AVENUE DAYTONA BEACH, FL 32015 <sup>Z</sup>34491 Summerfield FL 8. 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. I am familiar with, and accept the obligations of registered agent. Horst G. Hisam SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 158.75 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Delete TITLE TITLE NAME HISAM, HORST G. NAME 12177 SE 91st Ave. STREET ADDRESS 43076 CAROLLEWICK SQUARE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LEESBURG, VA 20176 Summerfield, FL 34491 ☐ Detete TITLE ☐ Addition Change TITLE HISAM, URSULA NAME NAME 12177 SE 91st Ave. STREET ADDRESS STREET ADDRESS 43076 CAROLLEWICK SQUARE CITY-ST-ZIP Summerfield, FL 34491 CITY-ST-ZIP LEESBURG, VA 20176 ☐ Delete TITLE ☐ Change ■ Addition TITLE HISAM, THORSTEN G NAME NAME STREET ADDRESS 42917 NASHNA ST STREET ADDRESS ASHBURN, VA 20147 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachrent with an address, with all other like empowered.

Horst G. Hisam,

Pres

Daytime Phone #

FILED Feb 22, 2005 8:00 am

**Secretary of State**