## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

831822

(2)

KUEHNE & NAGEL, INC.

Incloal Place of Business Mailin

## FILED May 11 1998 8:00am Secretary of State



20000

Principal Place of Business		Mailing Address					
10 EXCHANGE PLACE JERSEY CITY NJ 07302-0910		10 EXCHANGE PLACE JERSEY CITY NJ 07302-0910					
					DO NOT WRITE IN THIS SPACE		
						IIS SI ACL	<del></del>
					3. Date Incorporated or Qualified		1
					02/12/1974		
2. Principal Place of Business		2a. Mailing Address			4, FEI Number	<del>  </del>	pplied For
21		26			13-2571986		ot Applicable
Suite, Apl. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc		5. Certificate of Status Desired		Additional
22		27			• • • • • • • • • • • • • • • • • • • •		equired
City & State		City & State		6. Election Campaign Financing		May Be	
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Curr	ent Registered Agent		,	10. Name and Address of New Register	ed Agent	
СТ	CORPORATION SYSTEM		81	Name			
1200 S. PINE ISLAND ROAD				Stroot Add	dress (P.O. Box Number is Not Acceptable)		
	INTATION FL 33324		82	Slieel Add	gless (P.O. Box Number is Not Acceptable)		
ייי	ATIMITAL GOOLT		83				
			84	City		EL 85 Zip	Code
							ile registered
l office or r	<b>eniste</b> red ament or both, in the Sta	ite of Horida. Such change wa	is authorized bi	z ind corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as	s registered
agent. La	m familiar with, and accept the ob	igations of, Section 607.0505,	Florida Statute	s. ,	,		
SIGNATURE							
OIGHT OIL	Signature, typod or philled name of registered			int signature requ	ured when reinstating) DAT		
12,	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	V	☐ DELETE	1.1 TITLE			Change	Addition
NAME	wunn, rainer		1.2 NAME				
STREET ADDRESS	9 CLINTON AVE	LINTON AVE		ADDRESS			
CITY-ST-ZIP	MAPLEWOOD NJ		1.4 CITY - S	ST-ZIP			
TITLE	PD	DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	EBERT, FRED		, 2.2 NAME				
STREET ADDRESS	35 ROTARY DR.		2.3 STREET	LADDRESS			
	SUMMIT NJ		2.4 CITY -				
CITY-\$T-ZIP	VD	DELETE	3.1 TITLE	51-211		Change	Addition
	MESSERLI,PETER		3.2 NAME				
NAME	380 MOUNTAIN RD.		3.3 STREE	. YUNDICO			
STREET ADDRESS							
CITY-ST-ZIP	UNION CITY NJ	T OCCUPATION OF THE PARTY OF TH	3 4. CITY -	SI-ZIP		Change	Addition
TITLE	CD	DELETE	4.1 TITLE			□ Criaige	L. Availor
NAME	KUEHNE, K M		4. 2 NAME				1
STREET ADDRESS	DORFSTRASSE 50		4.3 STREE	T ADDRESS			
CITY-\$1-ZIP	SCHILDELLEGI SW		4.4 CiTY-5	ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	L Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CATY-ST-ZIP			5.4 CITY - :	S1-ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
				T ADDRESS			
STREET ADDRESS		/					
CITY-ST-ZIP	and if the the interesting and	Lucito this filing does not evalid	6.4 City-		in Section 119.07(3)(i) Florida Statutes I furthe	er certify that th	e information

I hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the information indicated on this annual report or supplimental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.