

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000212

FILED
Jan 05, 2004
Secretary of State

Entity Name: WITTENSTEIN SOLUTIONS, INC.

Current Principal Place of Business:

C/O THIEDMANN & EDLER
222 SOUTH RIVERSIDE PLAZA, SUITE 1410
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

C/O THIEDMANN & EDLER
222 SOUTH RIVERSIDE PLAZA, SUITE 1410
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4408146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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:	PD	() Delete
Name:	SMITH, KENNETH	
Address:	1440 HOWARD STREET	
City-St-Zip:	ELK GROVE VILLAGE, IL 60007	
Title:	S	() Delete
Name:	THIEDMANN, KLAUS U	
Address:	222 SOUTH RIVERSIDE PLAZA, SUITE 1410	
City-St-Zip:	CHICAGO, IL 60606	
Title:	T	() Delete
Name:	CASTILLON, CARLOS	
Address:	1440 HOWARD STREET	
City-St-Zip:	ELK GROVE VILLAGE, IL 60007	
Title:	CD	() Delete
Name:	WITTENSTEIN, MANFRED	
Address:	WALTER-WITTENSTEIN-STRASSE 1	
City-St-Zip:	97999 IGRSHEIM, GERMANY,	
Title:	D	() Delete
Name:	SCHWARZ, KARL-HEINZ	
Address:	WALTER-WITTENSTEIN-STRASSE 1	
City-St-Zip:	97999 IGRSHEIM, GERMANY,	

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 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: KLAUS U. THIEDMANN

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01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date