

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 APR 29 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F05000003457					
1. Entity Name LUFTHANSA TECHNIK NORTH AMERICA HOLDING, CORP.					
Principal Place of Business 5100 EAST SKELLY DR. SUITE 570 TULSA, OK 74135			Mailing Address 5100 EAST SKELLY DR. SUITE 570 TULSA, OK 74135		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 52-2206296	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City FL Zip Code	
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.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KOWALEWSKI, BERND		NAME		
STREET ADDRESS	5100 EAST SKELLY DR., SUITE 570		STREET ADDRESS		
CITY-ST-ZIP	TULSA, OK 74135		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	JANSEN, PETER		NAME		
STREET ADDRESS	HAM TV WEG BEIM JAGER 193 D-22335		STREET ADDRESS		
CITY-ST-ZIP	HAMBURG, GERMANY.		CITY-ST-ZIP		
TITLE	DST	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	WACHHOLZ, KLAUS		NAME		
STREET ADDRESS	5100 EAST SKELLY DR, SUITE 570		STREET ADDRESS		
CITY-ST-ZIP	TULSA, OK 74135		CITY-ST-ZIP		
TITLE	S	☒ Delete	TITLE	☐ Change	☐ Addition
NAME	TROWER, TROY		NAME		
STREET ADDRESS	5100 EAST SKELLY DR., SUITE 570		STREET ADDRESS		
CITY-ST-ZIP	TULSA, OK 74135		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	TROWER, TROY		NAME		
STREET ADDRESS	C/O LUFTHANSA TECHNIK PHILIPPINES, INC		STREET ADDRESS		
CITY-ST-ZIP	PASAY CITY, PH 1309		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.					
SIGNATURE: <u>Klaus Wachholz</u> (KLAUS WACHHOLZ, CTO) April 7, 08 (918) 3885006					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



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04-30-08

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04/29/08--01035--003 **26.25

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03/24/08--01023--003 **35.00