## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000005852

SCHUSTER, MARKUS

D-86925 FUCHSTAL-LEEDER, OC

FINKENWEG 4C

Name:

Address:

City-St-Zip:

Entity Name: SCHUSTER PRECISION AMERICA, INC.

FILED Apr 24, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9976 NW 64 CT PARKLAND, FL 33076 **Current Mailing Address: New Mailing Address:** 9976 NW 64 CT PARKLAND, FL 33076 FEI Number: 14-1975508 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNSCHOFSKY, CHRISTINE 9976 NW 64 CT PARKLAND, FL 33076 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SCHUSTER, HELMUT Name: Name: MENHOFER STRASSE 37 Address: Address: City-St-Zip: D-8920 DENKLINGEN, OC City-St-Zip: Title: **VCPS** Title: () Delete () Change () Addition HUNSCHOFSKY, CHRISTINE Name: Name: 9976 NW 64 CT Address: Address: PARKLAND, FL 33076 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition HUNSCHOFSKY, CHRISTINE Name: Name: 9976 NW 64 CT Address: Address: City-St-Zip: PARKLAND, FL 33076 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTINE HUNSCHOFSKY P 04/24/2007