

2007 FOR PROFIT CORPORATION REINSTATEMENT

12/19/06 01005 \$750.00

07 JUN 27 PM 2: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000005306

1. Entity Name
TAPROGGE AMERICA CORPORATION



Principal Place of Business
150-J EXECUTIVE DRIVE
EDGEWOOD, NY 11717

Mailing Address
150-J EXECUTIVE DRIVE
EDGEWOOD, NY 11717

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



06142807 REINSTATEMENT 06142807

4. FEI Number

13-5667528

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HRAWG CORP.
2000 GLADES RD., #400
BOCA RATON, FL 33431

Name
CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

City
PLANTATION

FL

Zip Code
33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: If the registered agent is a corporation, the signature must be of an officer or director of the corporation.)

Arlene Bernal
Assistant Secretary

6/25/07

DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
FROEHLING, RUTHARD
SCHLEIMAMSTR 2-14, D-58300
WETTER GERMANY, ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200105301502
07/03/07--01023--001 **158.75 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TAPROGGE, DETLEF
SCHLEIMAMSTR 2-14, D-58300
WETTER GERMANY, ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDC
GILLEN, STEVEN
100 CROSSWAYS PARK WEST
WOODBURY, NY 11797 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
150-5 EXECUTIVE DRIVE
EDGEWOOD, NY 11717 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VST
STANKOWIAK, GUNTER
100 CROSSWAYS PARK WEST
WOODBURY, NY 11797 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
150-5 EXECUTIVE DRIVE
EDGEWOOD, NY 11717 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LIGHT, WOLFGANG
SCHLEIMANSTR 2-14, D-58300
WETTER GERMANY, ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 title empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director
Steven Gillen

6.15.07

Date

031-964-1400

Daytime Phone #

B. Mitchell JUN 27 2007