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Jul 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000003121 (7)

1. Corporation Name

VOGEL LUBRICATION, INC.

Principal Place of Business

1008 JEFFERSON AVE
NEWPORT NEWS VA 23607

Mailing Address

1008 JEFFERSON AVE
NEWPORT NEWS VA 23607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1997

4. FEI Number

54-1416794

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALL, ROBERT
RT 12
LAKE CITY FL 32025

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME AHRENS, JOACHIM F
STREET ADDRESS 1207 HILL RD
CITY-ST-ZIP HAYES VA 23072

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME SCHINDLER, STEFAN DR
STREET ADDRESS MOTZENER STRASSE 35/37
CITY-ST-ZIP 12277 BERLIN, GERMANY

2.1 TITLE VD
2.2 NAME MANFRED E. NEUBERT
2.3 STREET ADDRESS MOTZENER STRASSE 35/37
2.4 CITY-ST-ZIP 12277 BERLIN, GERMANY

TITLE D
NAME GACA, HANS
STREET ADDRESS MOTZENER STRASSE 35/37
CITY-ST-ZIP 12277 BERLIN, GERMANY

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE S
NAME NICOLAI, LARRY D
STREET ADDRESS 9 MANOR HILL CT
CITY-ST-ZIP HAMPTON VA 23666

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE AS
NAME AHRENS, MARGRIT
STREET ADDRESS 1207 HILL RD
CITY-ST-ZIP HAYES VA 23072

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 or 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 on an attachment with an address.

CR2E034 (10/97)