

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# G58824

**FILED**  
**Jul 14, 2011**  
**Secretary of State**

**Entity Name:** ZEPPELIN SYSTEMS USA, INC.

**Current Principal Place of Business:**

13330 - 13322 BYRD DRIVE  
ODESSA, FL 335565312 US

**New Principal Place of Business:**

**Current Mailing Address:**

13330 BYRD DRIVE  
ODESSA, FL 335565312 US

**New Mailing Address:**

**FEI Number:** 59-2324237

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE CO.  
1201 HAYS STREET  
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

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: SCHERER, BERNHARD  
Address: 13330 BYRD DRIVE  
City-St-Zip: ODESSA, FL 335565312 US

Title: CEOD  
Name: ANDERSON, ROBERT W  
Address: 13330 BYRD DRIVE  
City-St-Zip: ODESSA, FL 335565312 US

Title: VS  
Name: IVKOVICH, BRIAN  
Address: 13330 BYRD DRIVE  
City-St-Zip: ODESSA, FL 335565312 US

Title: T  
Name: KESSLER, UDO  
Address: 13330 BYRD DR  
City-St-Zip: ODESSA, FL 335565312 US

Title: V  
Name: BIEGER, PATRICK  
Address: 13330 BYRD DR  
City-St-Zip: ODESSA, FL 335565312 US

I hereby 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 all other like empowered.

SIGNATURE: UDO KESSLER

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07/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date