

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-22-2002 90226 024 ****50.00

DOCUMENT # L01000005987

1. Entity Name

GERMAN HI TECH, LLC

Principal Place of Business

121 OYSTER CATCHER COURT
 DAYTONA BEACH FL 32119

Mailing Address

121 OYSTER CATCHER COURT
 DAYTONA BEACH FL 32119

86840

2090 S. Nova Rd

2. Principal Place of Business

AA08
 Suite, Apt. #, etc.

S. DAYTONA

City & State

FL 32119

Zip

Country

VOLUSIA

3. Mailing Address

Same
 Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number

59-3714114

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FRIEBIS, DANIEL S
 3890 TURTLE CREEK DRIVE, SUITE B-1
 PORT ORANGE FL 32127

7. Name and Address of New Registered Agent

Name *Same*
 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.

SIGNATURE *Andreas H. Felver* *Andreas H. Felver* *4-11-02*
 Signature, typed or printed name of registered agent and date if applicable. (NOT: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Principal</i> <i>Andreas H. Felver</i> <i>2090 S. Nova Rd, Suite AA08</i> <i>S. Daytona FL 32119</i>	☐ Delete
TITLE NAME STREET ADDRESS		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

10. ADDITIONS / CHANGES

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

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Andreas H. Felver* *4-11-02*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)