FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CÓRPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L39223

1. Corporation Name

DEUTSCHE AUTOMOBILE DESIGNS, INC.

DEUTOO	TE ACTOMODILE DECIGIO						
Principal Place	of Business	Mailing Address				•	
2140 TANBARK LN 2140 TANBARK LN							
FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	00.702	
					1	,	
					12/28/1989 4. FEI Number	ΙΔn	plied For
2. Principal Pl	ace of Business	2a. Mailing Address			1 22	<u> </u>	t Applicable
21		26		65-0162537	\$8.75 A		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Re		
22		27					
City & State	•	City & State			6. Election Campaign Financing		
28			Zip Country		Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible		51003
Zip	Country	Zip	_	У		intangible ☐ Yes	□No
24	25	11	30		Personal Property Tax. 10. Name and Address of New Registers		
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Registers	u Agent	
LATA	MUOLD DIETED		0				
WARMHOLD, DIETER			8	2 Street Add	et Address (P.O. Box Number is Not Acceptable)		
	TANBARK LANE		L		10 2 10 2 10 2 10 2 10 2 10 2 10 2 10 2		12.5 5 A 25 18 42
FIL	AUDERDALE FL 33312		8	3	· · · · · · · · · · · · · · · · · · ·		131 15 13
			8	4 City		85 Zip (Code
			i -		poration submits this statement for the purpose tion's board of directors. I hereby accept the app	<u>L</u>	
12.		it and title if applicable. (NOTE: ID DIRECTORS	13.	···	ned when reinstating) ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
TITLE	STD	□ ₽555.5	1.2 NAM		The Constitution of the Co		
NAME	WARMHOLD, DIETER						1
STREET ADDRESS	2140 TANBARK LANE			ET ADDRESS			. 1
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	□ per car	1.4 CITY			☐ Change	Addition
TITLE		☐ DELETE	2.1 TITU	ĺ			_
NAME			2.2 NAM				ļ
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			_	/-ST-ZIP		☐ Change	Addition
TITLE ,		☐ DELETE	3.1 TITL	1			
NAME	1 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		3.2 NAM				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP			_	-ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TITL	}		Change	C Addition
NAME ,			4, 2 NAN	4E			ļ
STREET ADDRESS			4.3 STR	EET ADDRESS			·
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			Addition
TITLE		☐ DELETE	5.1 TITL	I .	•	☐ Change	☐ Addition
NAME			5.2 NAM	E			: \
STREET ADDRESS				EET ADDRESS	** **		
CITY-ST-ZIP	e			'-ST-ZIP	- 3,		
TITLE	11.	☐ DELETE	6.1 TITL	E		☐ Change	☐ Addition
NAME	En Profes		6.2 NAN	E			.,
			6.3 STR	EET ADDRESS			

14. I hereby certify that the information supplied with this filling 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 of 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 arachment with an address, with all other impowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/33/99

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90057 002 ***150.00

Daytime Phone #

PDE034 (11/98)