2003 FOR PROFIT CORPORATION

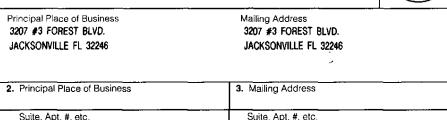
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000030951

1. Entity Name GERMAN MOTORS, INC.

Mailing Address



FILED Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90202 027 ***150.00



2. Principal P	Place of Business		3. Mailing Address				1 100 (100) 11: 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1) 00(1)					
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES						
City & State			City & State			4. FEIN	Number	59-3638796			oplied For ot Applicable	
Zip	Col	untry	Zip Coun			5. Certificate of Status Desired S8.75 Additional Fee Required						
	6Name and A	<u></u>	7. Name and Address of New Registered Agent									
FUCHS, L	AWRENCE M	ļ_	Name									
ESQ				Street Address (P.O. Box Number is Not Acceptable)								
	AL DALM BEACH	-										
	AL PALM BEACH	_										
	ALM BEACH FL :								Zip Cod			
	named entity subnitions of registered a		r the purpose of changing it	s registered	office or regis	stered agent,	or both, i	in the State of Florida.	l am far	miliar with,	and accept	
SIGNATURE .		·										
	Signature, typed or printe	d name of registered agent	and title if applicable. (NO	TE: Registered A	gent signature requ	uired when reinstat	ing)		DATE			
Afte	ILE NOW!!! FE r May 1, 2003 Fe c Payable to Flori					on Campaign Financi Fund Contribution.	ng		May Be to Fees			
10.		OFFICERS AND	DIRECTORS	11.		ADDITI	ONS/CH	ANGES TO OFFICER	S AND E	DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PLAATJE, THO 13845 HOLLOV JACKSONVILLE	/ LOG CT.	☐ Delete	TITLE NAME STREET / CITY-ST	ADDRESS - ZIP				[Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A CITY-ST		*]	☐ Change	☐ Addition	
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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 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 like empowered.

SIGNATURE: