
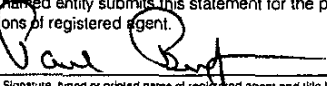
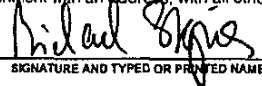


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000059936 1. Entity Name LIESEGANG CORPORATION						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 06 JAN 13 PM 3:02	
Principal Place of Business 1001 W CYPRESS CREEK RD STE 103 FORT LAUDERDALE, FL 33309				Mailing Address 1001 W CYPRESS CREEK RD STE 103 FORT LAUDERDALE, FL 33309			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent CAGGIANO, ROBERT P 8613 NW 52 PL. CORAL SPRINGS, FL 33067				7. Name and Address of New Registered Agent Name PAUL BERKOWITZ Street Address (P.O. Box Number is Not Acceptable) c/o Greenberg Traurig, P.A. 1221 Brickell Avenue City Miami FL Zip Code 33131			
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  1/13/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
<div style="text-align: right;"> 500064597185 7/25/06--01067--002 **150.00 </div>							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAMPEL, OLAF <input checked="" type="checkbox"/> Delete 8613 NW 52 PL. CORAL SPRINGS, FL 33067			TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D Michael Stepien <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Liesegang Optoelectronics GMBH Vogelsanger Weg 91 40470 Duesseldorf, Germany		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, D Gerd Mangels <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Liesegang Optoelectronics GMBH Vogelsanger Weg 91 40470 Duesseldorf, Germany		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  (MICHAEL STEPIEN) 13th January 2006 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							

1/13/06