

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90039 016 ***150.00

DOCUMENT # P38061		
1. Entity Name DEUTSCHE NICKEL AMERICA, INC.		

Principal Place of Business 279 JENCKES HILL RD SMITHFIELD, RI 02917 US	Mailing Address 279 JENCKES HILL RD SMITHFIELD, RE 02917 US
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2. Principal Place of Business 100 Higginson Ave Suite, Apt. #, etc.	3. Mailing Address 100 Higginson Ave Suite, Apt. #, etc.
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City & State Lincoln, RI	City & State Lincoln, RI
Zip 02865	Country USA

01232004 Chg-P CR2E034 (10/03)	
4. FEI Number 05-0455152	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CONNELLY, DAVID J CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD PLATATION, FL 33324	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIEBERT, JAN 279 JENCKES HILL RD SMITHFIELD, RI 02917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 100 Higginson Ave Lincoln, RI 02865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNOP, WOLFGANG 279 JENCKES HILL RD SMITHFIELD, RI 02917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 100 Higginson Ave Lincoln, RI 02865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STEELE, KEVIN J 279 JENCKES HILL ROAD SMITHFIELD, RI 02917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 100 Higginson Ave Lincoln, RI 02865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PARTH, MARCUS 279 JENCKES HILL ROAD SMITHFIELD, RI 02917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 100 Higginson Ave Lincoln, RI 02865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOLF, STEFAN 279 JENCKES HILL RD SMITHFIELD, RI 02917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition Wolff, Stefan 100 Higginson Ave Lincoln, RI 02865
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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: *Kevin Steele* **1/26/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #