

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
04 JUN - 04 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
ROHDE & LIESENFELD, INC.

DOCUMENT #
P38518 (7)

Main Office
2050 NW 93RD AVE
MIAMI FL 33172

Principal Place of Business
2050 NW 93RD AVE
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/21/1992 3a. Date of Last Report 03/15/1993

2. Mailing Address 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Principal Place of Business 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country	4. FEI Number 13-2853141 5. Certificate of Status Desired \$8.75 Additional Fee Required ☒ 7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐ 8. The corporation has liability for intangible tax under S. 19.132, Florida Statute. ☒ Yes ☐ No	6. Extension Certificate Filing Fee Grand Certificate ☐ \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

BERNSTEIN, SCOTT M
1001 S. BAYSHORE DR
SUITE 2600
MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN	
1. TITLE	C	1. TITLE	
2. NAME	LIESENFELD, DIETER	2. NAME	
3. STREET ADDRESS	MAYERHOFSTRASSE 9	3. STREET ADDRESS	
4. CITY, ST, ZIP	HAMBURG 52 W GERMANY	4. CITY, ST, ZIP	
5. TITLE	D	5. TITLE	
6. NAME	KNAACK, WERNER	6. NAME	DELETE KNAACK WERNER
7. STREET ADDRESS	PERLBERGWEG 39 2000 HAMB	7. STREET ADDRESS	
8. CITY, ST, ZIP	URG 65 GERMANY	8. CITY, ST, ZIP	
9. TITLE	P	9. TITLE	
10. NAME	LIESENFELD, BODO	10. NAME	
11. STREET ADDRESS	HOLWIETE 80	11. STREET ADDRESS	
12. CITY, ST, ZIP	HAMBURG 52 W GERMANY	12. CITY, ST, ZIP	
13. TITLE	V	13. TITLE	
14. NAME	BERINGER, JAN	14. NAME	
15. STREET ADDRESS	ONE WORLD TRADE CENTER	15. STREET ADDRESS	
16. CITY, ST, ZIP	NEW YORK NY	16. CITY, ST, ZIP	
17. TITLE	S	17. TITLE	
18. NAME	ENKISCH, JOACHIM	18. NAME	
19. STREET ADDRESS	DUEENENWEG 8 2200 ELM SHOR	19. STREET ADDRESS	
20. CITY, ST, ZIP	N GERMANY	20. CITY, ST, ZIP	
21. TITLE	T	21. TITLE	
22. NAME	MACKE, CARL PETER	22. NAME	
23. STREET ADDRESS	RISSNENER LANDSTR. 155	23. STREET ADDRESS	
24. CITY, ST, ZIP	HAMBURG GERMANY	24. CITY, ST, ZIP	

SIGNATURE: JAN C. BERINGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-94 (212) 430-1200