



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90262 047 ***150.00

DOCUMENT # P95000037949 1. Entity Name DIETER'S AUTOHAUS, INC.																																																																																										
Principal Place of Business DIETERS AUTOHAUS 7669 15TH ST E SARASOTA FL 34243 US		Mailing Address DIETERS AUTOHAUS 7669 15TH ST E SARASOTA FL 34243 US																																																																																								
2. Principal Place of Business Dieter's Autohaus, Inc. Suite, Apt. #, etc. 1302 Rome Av, Unit A City & State Sarasota FL Zip 34243 Country USA	3. Mailing Address Dieter's Autohaus, Inc. Suite, Apt. #, etc. 1302 Rome Av, Unit A City & State Sarasota FL Zip 34243 Country USA																																																																																									
4. FEI Number 65-0591190 <div style="float: right;"> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable </div>																																																																																										
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																										
6. Name and Address of Current Registered Agent MERIWEATHER, EILEEN 5009 - 54TH STREET W BRADENTON FL 34210																																																																																										
7. Name and Address of New Registered Agent Name Eileen Krausse Street Address (P.O. Box Number is Not Acceptable) 2009 54th Street West City Bradenton FL Zip Code 34210																																																																																										
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 _____																																																																																										
<div style="background-color: #cccccc; padding: 5px; border: 1px solid black;"> FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State </div>																																																																																										
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																										
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">PSD <input type="checkbox"/> Delete</td> <td style="width: 30%;">NAME</td> <td style="width: 30%;">KRAUSSE, DIETER</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5009 - 54TH STREET, WEST</td> <td>CITY - ST - ZIP</td> <td>BRADENTON FL 34210</td> </tr> <tr> <td>TITLE</td> <td>V <input type="checkbox"/> Delete</td> <td>NAME</td> <td>KRAUSSE, EILEEN</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5009 - 54TH STREET W</td> <td>CITY - ST - ZIP</td> <td>BRADENTON FL</td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td style="width: 30%;">NAME</td> <td style="width: 30%;"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> </tr> </table> </div> </div>			TITLE	PSD <input type="checkbox"/> Delete	NAME	KRAUSSE, DIETER	STREET ADDRESS	5009 - 54TH STREET, WEST	CITY - ST - ZIP	BRADENTON FL 34210	TITLE	V <input type="checkbox"/> Delete	NAME	KRAUSSE, EILEEN	STREET ADDRESS	5009 - 54TH STREET W	CITY - ST - ZIP	BRADENTON FL	TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY - ST - ZIP	
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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:  Dieter Krausse 4/16/04 (941) 360-9534 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																										

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MOORE CR2E034 (11/03)