

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000023227

Entity Name: SOMEK AMERICA, INC.

FILED  
Mar 23, 2005  
Secretary of State

## Current Principal Place of Business:

4901 TAMIAMI TRAIL N  
NAPLES, FL 34103 US

## New Principal Place of Business:

4938 EDITH ESPLANADE  
CAPE CORAL, FL 33904 US

## Current Mailing Address:

4901 TAMIAMI TRAIL N  
NAPLES, FL 34103 US

## New Mailing Address:

PO BOX 100853  
CAPE CORAL, FL 33910 US

FEI Number: 65-0656889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

U S INVESTOR SERVICES INC  
4901 TAMIAMI TRAIL NORTH  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

ASTRID P HARTLEB & ASSOC LLC  
1211 MIRAMAR STREET  
4  
CAPE CORAL, FL 33904 US

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.

SIGNATURE: ASTRID P HARTLEB

03/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ECKERMANN, JOERN  
Address: BROOKDEICH D-21029  
City-St-Zip: HAMBURG, GA

Title: VS ( ) Delete  
Name: ECKERMANN, IMKE  
Address: BROONDEICH #14  
City-St-Zip: HAMBURG, GA 21029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ECKERMANN, JOERN  
Address: BROOKDEICH #14  
City-St-Zip: HAMBURG, GA 21029

Title: VS (X) Change ( ) Addition  
Name: ECKERMANN, IMKE  
Address: BROOKDEICH #14  
City-St-Zip: HAMBURG, GA 21029

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOERN ECKERMANN

PTD

03/23/2005

Electronic Signature of Signing Officer or Director

Date