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3197 SHORELINE DRIVE CLEARWATER FL 33720

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27, 1999 8:00am

Secretary of State

. DO NOT WRITE IN THIS SPACE

01-27-1999 90061 006 ***150.00

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000036994

. Corporation Name

Principal Place of Business

3197 SHORELINE DRIVE

CLEARWATER FL 33720

SIGNATURE:

US

GERMAN TRADING, INC.

3. Date Incorporated or Qualifed 04/25/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3377960 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Zip Zip 8. This corporation owes the current year Intangible ☐ Yes ΠNo 29 30 Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BENWARE, ALAN J Street Address (P.O. Box Number is Not Acceptable) 8800 - 133RD AVENUE NORTH #16 **LARGO FL 34643** 83 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. 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, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating). CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ DELETE ☐ Change 1.1 TITLE TITLE ROEDER, KARSTEN 1.2 NAME NAME 3197 SHORELINE DR. 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ D€LETE ☐ Change 2.1 TITLE TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 17.5 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZiP CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.