

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038389

Entity Name: NISABE CORP.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

415 L'AMBIANCE DR., UNIT 905-D
LONGBOAT KEY, FL 34228 US

New Principal Place of Business:

Current Mailing Address:

VIKTORIAWEG 16
61350 BAD HOMBURG
GERMANY, XX

New Mailing Address:

415 L'AMBIANCE DR., UNIT 905-D
LONGBOAT KEY, FL 34228 US

FEI Number: 59-3377951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HECKER, SUSAN B
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PETERS, HANS P
Address: 415 L'AMBIANCE DR., UNIT 905-D
City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: D () Delete
Name: PETERS, MONIKA
Address: 415 L'AMBIANCE DR., UNIT 905-D
City-St-Zip: LONGBOAT KEY, FL 34228 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HANS PETER PETERS

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date