2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# P97000054672

Entity Name: KEMNA DRUCK KAMEN, INC.

Current Principal Place of Business:

STEINSTRASSEE 44
APT 18
WERNE, 59368 GE

New Principal Place of Business:

STEINSTRASSEE 44
APT 18
WERNE, GE 59368 GE

Current Mailing Address:

STEINSTRASSEE 44
APT 18
WERNE, 59368 GE

New Mailing Address:

STEINSTRASSEE 44
APT 18
WERNE, GE 59368 GE

FEI Number: 59-3449558 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAHAM, JAMES S
320 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952 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: JAMES S. LAHAM
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KEMNA, KARL A
Address: STEINSTAPE 44
City-St-Zip: WERUE, 59368 GE

Title: V ( ) Delete
Name: KEMNA-HECKMANN, SABINE
Address: GUTENBERGSTRASSE 6-8
City-St-Zip: KAMEN, 59174 GE

Title: S ( ) Delete
Name: KEMNA, FRANK
Address: GUTENBERGSTRASSE 6-8
City-St-Zip: KAMEN, 59174 GE

Title: D ( ) Delete
Name: KEMNA, STEFAN
Address: GUTENBERGSTRASSE 6-8
City-St-Zip: KAMEN, 59174 GE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: KARL KEMNA D 04/07/2005
Electronic Signature of Signing Officer or Director Date