

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000051853

FILED  
Feb 17, 2003  
Secretary of State

Entity Name: NOLTE KITCHENS, INC.

## Current Principal Place of Business:

274 BRYAN ROAD  
DANIA, FL 33004

## New Principal Place of Business:

## Current Mailing Address:

274 BRYAN ROAD  
DANIA, FL 33004

## New Mailing Address:

FEI Number: 65-0850002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STRICKMANN, GERHARD  
NOLTE KITCHENS, INC.  
274 BRYAN RD  
DANIA, FL 33004

## Name and Address of New Registered Agent:

PALSSON, MAGNUS  
NOLTE KITCHENS, INC.  
274 BRYAN RD  
DANIA, FL 33004

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: MAGNUS PALSSON

02/17/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WIPPERMANN, MANFRED  
Address: 274 BRYAN RD  
City-St-Zip: DANIA, FL 33004

Title: D ( ) Delete  
Name: STRICKMANN, GERHARD  
Address: 274 BRYAN ROAD  
City-St-Zip: DANIA, FL 33004

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P ( ) Change (X) Addition  
Name: PALSSON, MAGNUS  
Address: 274 BRYAN ROAD  
City-St-Zip: DANIA, FL 33004

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: MAGNUS PALSSON

P

02/17/2003

Electronic Signature of Signing Officer or Director

Date