2006 FOR PROFIT CORPORATION ANNUAL REPORT

8/16/2006-90003-040-$550.00-$550.00

DOCUMENT # P99000089648

1. Entity Name
VOLKSWAGEN GROUP LATIN AMERICA, INC.

FILED
06 OCT 16 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
701 WATERFORD WAY (NW 62ND AVE) SUITE 590 MIAMI, FL 33126	701 WATERFORD WAY (NW 62ND AVE) SUITE 590 MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

07062006 No Chg-P CR2E034 (11/05)

4. FEI Number
38-6748835
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KRUEGER, BERTHOLD
STREET ADDRESS	VIA ANCHIETA, KM 23 , 5
CITY-ST-ZIP	SAO PABLO BRASIL,
TITLE	D
NAME	ALCANTARA, LAURO
STREET ADDRESS	WOLFSBURG, NIEDERSACHSEN
CITY-ST-ZIP	DEUSCHLAND, GERMANY,
TITLE	V
NAME	ESPIL, FELIPE
STREET ADDRESS	701 WATERFORD WAY, SUITE 590
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	T
NAME	DAVIDSON, WILLIAM S
STREET ADDRESS	3800 HAMLIN ROAD
CITY-ST-ZIP	DETROIT, MI 48226
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

10/20

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #