

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthenson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30268** (7)

1. Corporation Name

MAN B&W DIESEL, INC.

Principal Place of Business

**17 STATE STREET
NEW YORK NY 10004**

Mailing Address

**17 STATE STREET
NEW YORK NY 10004**



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, 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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this statement

Signature of the person who is authorized to sign this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	WINDLEEV, CLAUD	☐ DELETE
NAME			
STREET ADDRESS		17 STATE ST	
CITY- ST- ZIP		NEW YORK NY	
TITLE	S	THOMSEN, LARS K	☐ DELETE
NAME			
STREET ADDRESS		17 STATE ST	
CITY- ST- ZIP		NEW YORK NY	
TITLE	D	HOLMBLAD, LARS	☐ DELETE
NAME			
STREET ADDRESS		STAMHOLMEN 161, DK 2650	
CITY- ST- ZIP		COPENHAGEN, DENMARK	
TITLE	D	SCHULTE, HANS-JUERGEN, DR	☐ DELETE
NAME			
STREET ADDRESS		STADBACH STRASSE 1, D8900	
CITY- ST- ZIP		AUGSBURG, WEST GERMA	
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY- ST- ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY- ST- ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY- ST- ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY- ST- ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY- ST- ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY- ST- ZIP	☐ Change ☐ Addition
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY- ST- ZIP	☐ Change ☐ Addition
25. TITLE	
26. NAME	
27. STREET ADDRESS	
28. CITY- ST- ZIP	☐ Change ☐ Addition
29. TITLE	
30. NAME	
31. STREET ADDRESS	
32. CITY- ST- ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied to this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. WINDLEEV

3.28.96

212-269 0980

CR2E034 (12/95)