# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Feb 05, 2002 8:00 am**
**Secretary of State**
02-05-2002 90124 026 ***150.00

DOCUMENT # 829814

1. Entity Name
APV NORTH AMERICA, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 9525 W. BRYN MAWR AVENUE<br>ROSEMONT IL 60018 | 9525 W. BRYN MAWR AVENUE<br>ROSEMONT IL 60018 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 5100 N. River Road | 5100 N. River Road |
| Suite, Apt. #, etc.: 3rd Floor | Suite, Apt. #, etc.: 3rd Floor |
| City & State: Schiller Park,IL | City & State: Schiller Park,IL |
| Zip: 60176 Country: USA | Zip: 60176 Country: USA |

4. FEI Number: 36-2759592 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| CT CORPORATION SYSTEM<br>1200 S. PINE ISLAND ROAD<br>PLANTATION FL 33324 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City **FL** Zip Code |

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2002 Fee will be $550.00**
**Make Check Payable to Department of State**

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

| 11. OFFICERS AND DIRECTORS | | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HENDERSON, BRUCE<br>33 COMMERCIAL ST<br>FOXBORO MA 02035 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | President<br>Mike Caliel<br>10707 Haddington Drive<br>Houston, TX 77043 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>BERGSTROM, CRAIG<br>9525 W BRYN MAWR<br>ROSEMONT IL 60018 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | Vice President<br>Philip Maynard<br>2191 Fox Mill Road, #500<br>Herndon, VA 20171 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>HARTNER, CRAIG<br>9525 W BRYN MAWR<br>ROSEMONT IL 60018 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>EHLE, JAY<br>33 COMMERCIAL ST<br>FOXBORO MA 02035 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SRAS<br>KANG, JOSEPH<br>9525 W BRYN MAWR<br>ROSEMONT IL 60018 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E034 (9/01)

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

**SIGNATURE:** Joseph Kang SIGNATURE REQUIRED 1/10/02 847/928-3590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #