

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

01-31-2001 90282 041 ***150.00

0130572 AT

DOCUMENT # 833930

1. Entity Name
UNIVERSAL OIL PRODUCTS COMPANY

Principal Place of Business 25 E. ALGONQUIN ROAD DES PLAINES IL 60017	Mailing Address 25 E. ALGONQUIN ROAD DES PLAINES IL 60017
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 36-2824643	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT RODER, EDWARD, T 25 E. ALGONQUIN ROAD DES PLAINES IL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Humberto Vainieri 25 E. Algonquin Rd. Des Plaines, IL 60014 - President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VAN DE KERCKHOVE, MICHAEL 25 E. ALGONQUIN ROAD DES PLAINES IL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINFIELD, MICHAEL D. 25 E. ALGONQUIN ROAD DES PLAINES IL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIDSON, GEORGE J. 25 E ALGONQUIN RD DES PLAINES IL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOFTUS, BRIAN A 25 E ALGONQUIN ROAD DES PLAINES IL 60017 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Edward T. Roder Date: 9-5-01 Daytime Phone #: 847-391-2087

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E004 (5/01)

Attachment

12590



UOP LLC • 25 East Algonquin Road • Des Plaines, Illinois 60017-5017 • Tel: 847.391.2000 • Fax: 847.391.2253

September 6, 2001

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1600

RE: Universal Oil Products Company - 833930

To Whom it May Concern:

We received a notice that our corporation needed a correction to the original Uniform Business Report filed in January. Enclosed is an updated form with the title of Humberto Vainieri added. I was advised by Jennifer in answer to my e-mail query in regard to filing \$550 by September 12, that our original \$150 fee was kept and all that was currently needed was this correction. I had not seen the original notice asking for the correction, so am submitting it now and apologize for the delay.

If you are in need of anything further, please advise at your earliest convenience.

Best regards,

A handwritten signature in cursive script that reads "Cindy Fosnow".

Cindy Fosnow
Tax Department

Phone: (847) 391-3056

Fax: (847) 391-2863

E-mail: CAFOSNOW@uop.com