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May 04, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000002983

1. Corporation Name
J & L AMERICA, INC.



Principal Place of Business 31800 INDUSTRIAL RD., LIVONIA EXECUTIVE PK LIVONIA MI 48150	Mailing Address 31800 INDUSTRIAL RD., LIVONIA EXECUTIVE PK LIVONIA MI 48150
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/09/1997	
21		26		4. FEI Number 38-2341391	Applied For Not Applicable
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip Country		29. Zip Country		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT, CEO, + DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUPRICH, MICHAEL W	1.2 NAME	RICHARD J. ORWIG
STREET ADDRESS	RT 981 S., PO BOX 231	1.3 STREET ADDRESS	31800 INDUSTRIAL ROAD
CITY-ST-ZIP	LATROBE PA 15650	1.4 CITY-ST-ZIP	LIVONIA, MI 48151
TITLE	T <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRISON, JAMES E	2.2 NAME	
STREET ADDRESS	RT 981 S., PO BOX 231	2.3 STREET ADDRESS	
CITY-ST-ZIP	LATROBE PA 15650-0	2.4 CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> DELETE	3.1 TITLE	ASSISTANT TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIBSON, RICHARD P	3.2 NAME	BRIAN E. KELLY
STREET ADDRESS	RT 981 S., PO BOX 231	3.3 STREET ADDRESS	1600 TECHNOLOGY WAY
CITY-ST-ZIP	LATROBE PA 15650	3.4 CITY-ST-ZIP	LATROBE, PA 15650
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COFER, DAVID T	4.2 NAME	
STREET ADDRESS	RT 981 S., PO BOX 231	4.3 STREET ADDRESS	
CITY-ST-ZIP	LATROBE PA 15650	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NOWE, KEVIN G	5.2 NAME	
STREET ADDRESS	RT 981 S., PO BOX 231	5.3 STREET ADDRESS	
CITY-ST-ZIP	LATROBE PA 15650	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	VICE PRESIDENT + TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	DIANA L. SCOTT
STREET ADDRESS		6.3 STREET ADDRESS	31800 INDUSTRIAL ROAD
CITY-ST-ZIP		6.4 CITY-ST-ZIP	LIVONIA MI 48151

14. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** ASSIST. TREASURER 4/26/99 (724)539-5241
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)

J & L AMERICA INC.
OFFICERS AND DIRECTORS

475589-90017-2
F97 000002983

TITLE	NAME	BUSINESS ADDRESS
President, CEO & Director	Richard J. Orwig	31800 Industrial Road Livonia MI 48151
Vice President, CFO & Director	Michael J. Mussog	31800 Industrial Road Livonia MI 48151
Vice President	John M. Beaudoin	31800 Industrial Road Livonia MI 48151
Vice President	Chuck Lendvoyi	31800 Industrial Road Livonia MI 48151
Vice President	Paul Fuller	31800 Industrial Road Livonia MI 48151
Vice President & Treasurer	Diana L. Scott	31800 Industrial Road Livonia MI 48151
Assistant Treasurer	Brian E. Kelly	1600 Technology Way Latrobe PA 15650
Assistant Treasurer	Larry Lanza	1600 Technology Way Latrobe PA 15650
Assistant Treasurer	James E. Morrison	1600 Technology Way Latrobe PA 15650
Secretary	David T. Cofer	1600 Technology Way Latrobe PA 15650
Assistant Secretary	Kevin G. Nowe	1600 Technology Way Latrobe PA 15650