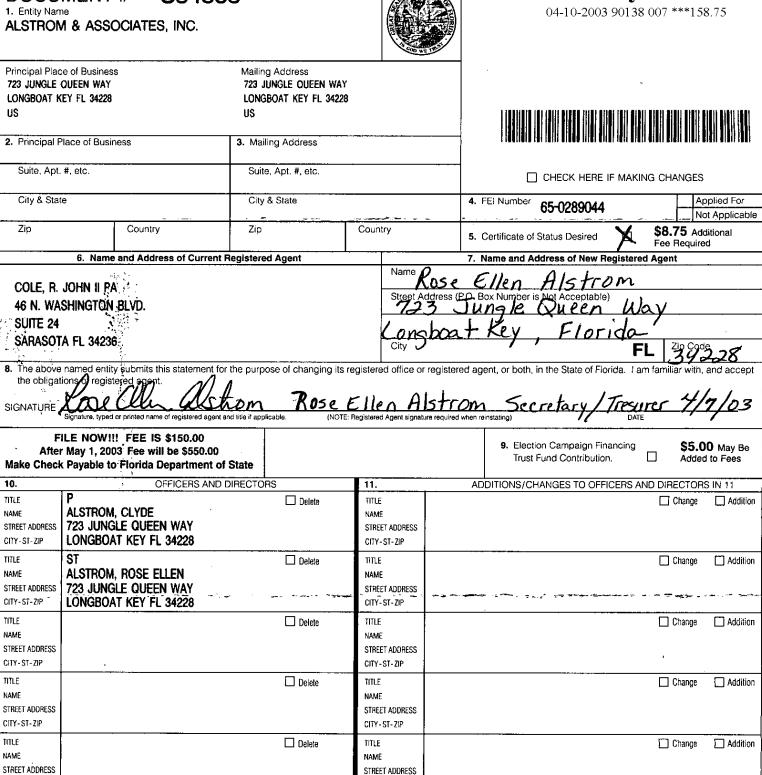
FILED Apr 10, 2003 8:00 am Secretary of State

2003 FO	R PROF	IT CORP	ORATION
UNIFORM	BUSIN	ESS REP	ORT (UBR)

S84358 DOCUMENT #



12. Thereby 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 10 or Block 11 if changed, or on an attack nt with an address, wit other like empowered

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

Then Alstrom Secretary 4/7

☐ Change

☐ Addition