

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 SEP 16 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Katherine Hams
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G38542

1. Corporation Name

Aluminiumwerk Unna-USA, Inc.

000008050440--0

-09/26/02--01038--018

****758.75 ****758.75

000008050440--0

-09/26/02--01038--019

****150.00 ****150.00

REINSTATEMENT 01-02

2. Principal Office Address

3033 S. PARKER RD.

3. Mailing Office Address

3033 S. PARKER RD.

Suite, Apt #, etc.

SUITE G30

Suite, Apt. #, etc.

SUITE G30

City & State

AURORA, CO

City & State

AURORA, CO

Zip

80014

Country

USA

Zip

80014

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

05/16/1983

5. FEI Number

592299749

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, VS.

Signature of
Registered Agent

Christine Noack
REGISTERED AGENT MUST SIGN

Date

9/16/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	DR. ROLF KOTTMANN	UELZENER WEG 36	D-59425 UNNA, GERMANY
P	VOLKER FINDEISEN	UELZENER WEG 36	D-59425 UNNA, GERMANY
V/M	PETRA EISENBLAETTER	11621 MASONVILLE DR.	PARKER, CO 80134

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 61 T, F.S. I further certify* that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Petra Eisenblaetter

PETRA EISENBLAETTER

Date

9/11/02 (303) 755-5672

Daytime Phone #