

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002961

Entity Name: ECOLANE USA INC.**Current Principal Place of Business:**2601 NAVISTAR DRIVE
LISLE, IL 60532**Current Mailing Address:**2601 NAVISTAR DRIVE
LISLE, IL 60532 US**FEI Number:** 26-1890678**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US*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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ASHLEY, MATTHEW
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title SECRETARY
Name CAPERS, DOROTHY G.
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title TREASURER
Name SUAREZ, ALEJANDRO CASTRO
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title DIRECTOR
Name ASHLEY, MATTHEW
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title DIRECTOR
Name CAPERS, DOROTHY G.
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title DIRECTOR
Name CRAWFORD, JUDITH A.
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title DIRECTOR
Name SUAREZ, ALEJANDRO CASTRO
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

Title DIRECTOR
Name WAITS, GARY L. JR.
Address 2601 NAVISTAR DRIVE
City-State-Zip: LISLE IL 60532

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DOROTHY G. CAPERS**SECRETARY****03/20/2019**

Electronic Signature of Signing Officer/Director Detail

Date