2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002498

Entity Name: OWENS-ILLINOIS, INC.

Current Principal Place of Business:

ONE MICHAEL OWENS WAY TAX DEPT - PLAZA ONE PERRYSBURG, OH 43551-2999

Current Mailing Address:

ONE MICHAEL OWENS WAY TAX DEPT - PLAZA ONE PERRYSBURG, OH 43551-2999 US

FEI Number: 22-2781933 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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

FILED Feb 15, 2013

Secretary of State

CC5822615852

Officer/Director Detail:

Title	CEO	Title	TREASURER
Name	STROUCKEN, ALBERT P	Name	AMEZQUITA, JUAN

Address ONE MICHAEL OWENS WAY Address ONE MICHAEL OWENS WAY

City-State-Zip: PERRYSBURG OH 43551-2999 City-State-Zip: PERRYSBURG OH 43551-2999

Title VPS Title VP

Name BAEHREN, JAMES W Name DE WEERT, ARNAUD

Address ONE MICHAEL OWENS WAY Address ONE MICHAEL OWENS WAY

City-State-Zip: PERRYSBURG OH 43551-2999 City-State-Zip: PERRYSBURG OH 43551-2999

Title ASST, TREASURER Title CFO

NameADAMS, JAMES ENameBRAMLAGE, STEPHEN PJRAddressONE MICHAEL OWENS WAYAddressONE MICHAEL OWENS WAYCity-State-Zip:PERRYSBURG OH 43551-2999City-State-Zip:PERRYSBURG OH 43551-2999

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: JAMES E ADAMS

Electronic Signature of Signing Officer/Director Detail

ASST. TREASURER

02/15/2013