

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14052

**Entity Name:** OWENS-BROCKWAY GLASS CONTAINER INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 22-2784144

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. 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

**Officer/Director Detail :**

Title CEO AND PRESIDENT  
Name LOPEZ, ANDRES A.  
Address ONE MICHAEL OWENS WAY  
City-State-Zip: PERRYSBURG OH 43551-2999

Title SVP AND CFO  
Name HAUDRICH , JOHN A  
Address ONE MICHAEL OWENS WAY  
City-State-Zip: PERRYSBURG OH 43551-2999

Title CHAIRMAN  
Name WILLIAMS , CAROL A.  
Address ONE MICHAEL OWENS WAY  
City-State-Zip: PERRYSBURG OH 43551-2999

Title VP, GLOBAL TAX  
Name GEDRIS , SCOTT  
Address ONE MICHAEL OWENS WAY  
City-State-Zip: PERRYSBURG OH 43551-2999

Title VP, TREASURER  
Name PATEL, ANAND  
Address ONE MICHAEL OWENS WAY  
City-State-Zip: PERRYSBURG OH 43551-2999

Title SVP AND GENERAL COUNSEL  
Name WILKINSON, MARY BETH  
Address ONE MICHAEL OWENS WAY  
City-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:** SCOTT GEDRIS

VP, GLOBAL TAX

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date