

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003937

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** CONTINENTAL GIRBAU, INC.

**Current Principal Place of Business:**

2500 STATE HIGHWAY 44  
OSHKOSH, WI 54904

**New Principal Place of Business:**

**Current Mailing Address:**

2500 STATE HIGHWAY 44  
OSHKOSH, WI 54904

**New Mailing Address:**

**FEI Number:** 39-1826789

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** DIRE  
**Name:** ALAMANY, ALEX  
**Address:** C/ARQUEBISBE ALEMANY N:9, ATIC  
**City-St-Zip:** VIC-BARCELONA SPAIN, WI 08500 SP

**Title:** PRES  
**Name:** FLOYD, MICHAEL T  
**Address:** 4144 STONEGATE DRIVE  
**City-St-Zip:** OSHKOSH, WI 54904

**Title:** DIRE  
**Name:** RIBALTA, SANTIAGO C  
**Address:** GALLISA 29-06B  
**City-St-Zip:** VIC-BARACELONA 08500 SPAIN, WI 08500 SP

**Title:** DIRE  
**Name:** BOVER, ANTONI G  
**Address:** S/SAGRADA FAMILIA 20  
**City-St-Zip:** VIC-BARACELONA 08500 SPAIN, WI 08500 SP

**Title:** DIRE  
**Name:** BOVER, PERE GIRBAU  
**Address:** PL. MAJOR 21  
**City-St-Zip:** VIC-BARACELONA 08500 SPAIN, WI 08500 SP

**Title:** DIRE  
**Name:** JUNYENT, MERCE G  
**Address:** C/CALABRIA 17-2ON2A  
**City-St-Zip:** VIC-BARACELONA 08500 SPAIN, WI 08500 SP

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:** MICHAEL T FLOYD

PRES

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date