2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000006237

BOST, ROBERT

SPRING, TX 77379

8207 PHEASANT GLEN DR

Name:

Address: City-St-Zip:

Entity Name: OMRON IDM CONTROLS, INC.

FILED Feb 17, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9510 N. HOUSTON ROSSLYN ROAD HOUSTON, TX 77088 **Current Mailing Address: New Mailing Address:** 9510 N. HOUSTON ROSSLYN ROAD HOUSTON, TX 77088 FEI Number: 36-4283627 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NEWBURN, FRANK Name: Name: 1112 THOUSAND OAKS DRIVE Address: Address: City-St-Zip: BARTLETT, IL 60103 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MIURA, TAKESLU Name: 1548 N ST MARKS PLACE Address: Address: PALATINE, IL City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition YUKAWA, SOICHI Name: Name: 1063 HIDDENBROOK TRAIL Address: Address: City-St-Zip: PALATINE, IL City-St-Zip: Title: () Delete Title: () Change () Addition HORA, TAKAHISA Name: Name: TAKEHARA NAGAIZU WICHO SUNTOUGAN SHIZUOKA Address: Address: City-St-Zip: PREF. 411-0944 JAPAN. City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT BOST D 02/17/2003