

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001552

FILED  
Jan 28, 2009  
Secretary of State

Entity Name: DEMAG CRANES & COMPONENTS CORP.

## Current Principal Place of Business:

29201 AURORA ROAD  
SOLON, OH 44139

## New Principal Place of Business:

## Current Mailing Address:

3502 RIGA BLVD., SUITE C  
TAMPA, FL 33619

## New Mailing Address:

FEI Number: 38-1804879

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PAXTON, JOHN  
Address: 5363 PARK VISTA COURT  
City-St-Zip: STOW, OH 44224 ``

Title: VP ( ) Delete  
Name: JEPSON, WILLIAM  
Address: 2180 NORTH KIRTLAND PLACE  
City-St-Zip: HUDSON, OH 44236

Title: VP ( ) Delete  
Name: BARTH, BERNARD  
Address: 2116 DEMI DRIVE  
City-St-Zip: TWINSBURG, OH 44087

Title: D (X) Delete  
Name: JOOS, HAROLD  
Address: POSTFACH 67, 58286 WETLER, RUHRSTRABE 28  
City-St-Zip: WETTER, FED. REP. GERMANY, 58300

Title: D (X) Delete  
Name: PAXTON, JOHN  
Address: 5363 PARIC VISTA COURT  
City-St-Zip: STOW, OH 44224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: BARTH, BERNHARD  
Address: 2116 DEMI DRIVE  
City-St-Zip: TWINSBURG, OH 44087

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: BERNHARD BARTH

VP

01/28/2009

Electronic Signature of Signing Officer or Director

Date