2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002874

Entity Name: SAPA EXTRUDER, INC.

FILED Feb 22, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

AIRPORT OFFICE PARK BLDG 2, 400 ROUSER RD 9600 W. BRYN MAWR AVENUE

6TH FLOOR SUITE 250

MOONTOWNSHIP, PA 15108 US ROSEMONT, IL 60018 US

Current Mailing Address: New Mailing Address:

AIRPORT OFFICE PARK BLDG 2, 400 ROUSER RD 9600 W. BRYN MAWR AVENUE 6TH FLOOR SUITE 250

MOONTOWNSHIP, PA 15108 US ROSEMONT, IL 60018 US

FEI Number: 27-0458629 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 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

OFFICERS AND DIRECTORS:

Title: PD

Name: LAWLOR, PATRICK

Address: 9600 W. BRYN MAWR AVENUE, SUITE 250

City-St-Zip: ROSEMONT, IL 60018 US

Title: DCFO

Name: KAVANAUGH, ROBERT

Address: 9600 W. BRYN MAWR AVENUE, SUITE 250

City-St-Zip: ROSEMONT, IL 60018 US

Title: DVP

Name: RUBICKY, ROBERT

Address: 9600 W. BRYN MAWR AVENUE, SUITE 250

City-St-Zip: ROSEMONT, IL 60018 US

Title: DVPS

Name: BELCASTRO, JACQUELYNE

Address: 9600 W. BRYN MAWR AVENUE, SUITE 250

City-St-Zip: ROSEMONT, IL 60018 US

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: JACQUELYNE BELCASTRO SEC 02/22/2012