## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # F94000001275 Feb 08, 2000 8:00 am **Secretary of State** MACGREGOR (USA) INC. 02-08-2000 90174 008 \*\*\*150.00 Principal Place of Business Mailing Address 4548 NORTH HIATUS ROAD TYLE SUNRISE FL 33351 2 WATTER P. O. BOX 708 N/A PINE BROOK NJ 07058-0708 **UUU16443** US 中国的 医二甲甲基 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 31-1359856 Not Applicable -Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00. 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition Director X Delete TITLE TITLE Albina, John A. NAME NAME ALBINO, JOHN A 20 Chapin Road, Unitioiz STREET ADDRESS 20 CHAPIN ROAD, UNIT 1012 STREET ADDRESS CITY-ST-7/P Pine Brook, NJ 07058 DITY-ST-ZIP PINE BROOK NJ X Addition President Change ☐ Delete TITLE TITLE Royal Joslin JARMO TUHKANEN NAME NAMÉ 20 Chapin Road, Unitioiz STREET ADDRESS STREET ADDRESS HALLIMEST ARINKATU 6 KAARINA FI CITY-ST-ZIP CITY-ST-ZIP. Pine Brook NJ 07058 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME HEDGER, THOMAS C STREET ADDRESS STREET ADDRESS 20 CHAPIN ROAD, UNIT 1012 CITY-ST-ZIP CITY-ST-ZIP PINE BROOK NJ ☐ Change □ Addition TITLE TITLE ☐ Delete JAGRAEUS, ANDERS NAME NAME STREET ADDRESS STREET ADDRESS HAMNGATAN 2 CITY-ST-ZIP CITY-ST-ZIP STOCKHOLM SD Change ☐ Addition TITLE ☐ Delete TITLE LINDSTROM, KENNETH NAME NAME STREET ADDRESS HALLIMESTARINKATU 6 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FIN-20780 KARINA FL Skiller St. Delete (1887) ☐ Addition Change 20 数X 1X 30 5 NĂMERLOJ E NAME HANSON, MATS STREET ADDRESS STREET ADDRESS **HAMNGATON 2** CITY-ST-ZIP CITY-ST-ZIP STOCKHOLM SD

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINTED NAME OF SIGNING OFFICER OR PRECEDOR

2/4/00 973-Z442-U100