2002 UNIFORM BUSINESS REPORT (UBR)

May 14, 2002 8:00 am Secretary of State **DOCUMENT #** F95000000375 1. Entity Name PORTEOUS FASTENER COMPANY 05-14-2002 90046 044 ***150.00 Principal Place of Business Mailing Address 1040 WATSON CENTER ROAD 1040 WATSON CENTER ROAD CARSON CA 90745 CARSON CA 90745 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 95-2596725 Not Applicable Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST., STE, 105 TALLAHASSEE FL 32301 Zip Code 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) 9. This corporation is eligible to satisfy its Intangible FILE NOWILL-FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State П Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE CR2E034 (9/01) ☐ Addition NAME PORTEOUS, JOHN B NAME STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIP CARSON CA 90745 CITY-ST-7/P DP Delete TITLE ☐ Change NAME ☐ Addition PORTEOUS, BARRY NAME STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIF CARSON CA 90745 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME PATCHETT, KEN NAME STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIP CARSON CA 90745 CITY-ST-7/P **VCFO** ☐ Delete TITLE Change Addition NAMES OSIER, V. WILLIAM STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIF CARSON CA 90745 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME PORTEOUS, ROBERT F NAME STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIP CARSON CA 90745 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME CLARK, KEVIN NAME STREET ADDRESS 1040 WATSON CENTER ROAD STREET ADDRESS CITY-ST-ZIP CARSON CA 90745 CITY-ST-ZIP

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 changed, or on an attachment with an address, with at other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 Date

Daytime Phone #

FILED