

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002935

Entity Name: IGUS BEARINGS, INC.

FILED  
Mar 16, 2009  
Secretary of State

## Current Principal Place of Business:

PO BOX 14349  
EAST PROVIDENCE, RI 02914

## New Principal Place of Business:

50 NORTH BROADWAY  
EAST PROVIDENCE, RI 02916

## Current Mailing Address:

PO BOX 14349  
EAST PROVIDENCE, RI 02914

## New Mailing Address:

FEI Number: 05-0419384

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: PT ( ) Delete  
Name: BLASE, FRANK  
Address: 50 NORTH BROADWAY  
City-St-Zip: EAST PROVIDENCE, RI 02914

Title: VS ( ) Delete  
Name: BLASE, CARSTEN O  
Address: 50 NORTH BROADWAY  
City-St-Zip: EAST PROVIDENCE, RI 02914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CARSTEN BLASE

VP

03/16/2009

Electronic Signature of Signing Officer or Director

Date