


# 2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91021 001 \*\*\*150.00

<b>DOCUMENT #</b> F97000002983	
1. Entity Name J & L AMERICA, INC.	

Principal Place of Business 31800 INDUSTRIAL RD. LIVONIA EXECUTIVE PK LIVONIA MI 48150	Mailing Address 31800 INDUSTRIAL RD. LIVONIA EXECUTIVE PK LIVONIA MI 48150
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 38-2341391	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. I am familiar with, and accept the obligations of registered agent.

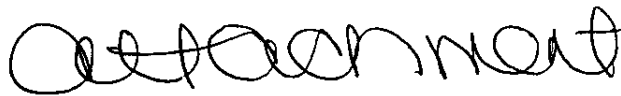
SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COD WESSNER, MICHAEL P 31800 INDUSTRIAL RD LIVONIA MI 48151 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President + Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORRISON, JAMES E 1600 TECHNOLOGY WAY, P.O. BOX 231 LATROBE PA 15650-0 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT KELLY, BRIAN 1600 TECHNOLOGY WAY, P.O. BOX 231 LATROBE PA 15650-0 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GREENFIELD, DAVID W 1600 TECHNOLOGY WAY, P.O. BOX 231 LATROBE PA 15650-0 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President + Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NOWE, KEVIN G 1600 TECHNOLOGY WAY, P.O. BOX 231 LATROBE PA 15650-0 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDI DARIN, NICKOLAS 31800 INDUSTRIAL RD LIVONIA MI 48151 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Brian E. Kelly 4/26/04 724-539-5241  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



**J & L AMERICA INC.**

**OFFICERS AND DIRECTORS**

FF 79700000983

<b>TITLE</b>	<b>NAME</b>	<b>BUSINESS ADDRESS</b>
President & Director	Michael P. Wessner	PO Box 3359 31800 Industrial Road Livonia MI 48151
Vice President, Director of Finance, Treasurer, & Director	Nickolas Darin	PO Box 3359 31800 Industrial Road Livonia MI 48151
Vice President, Marketing & Supply Chain Management	Chuck A. Moyer	PO Box 3359 31800 Industrial Road Livonia MI 48151
Vice President, Sales	Joseph Scime	PO Box 3359 31800 Industrial Road Livonia, MI 48151
Vice President & Secretary	David W. Greenfield	1600 Technology Way Latrobe PA 15650
Assistant Secretary	Kevin G. Nowe	1600 Technology Way Latrobe PA 15650
Vice President	James E. Morrison	1600 Technology Way Latrobe PA 15650
Treasurer	Lawrence J. Lanza	1600 Technology Way Latrobe PA 15650
Assistant Treasurer	Brian E. Kelly	1600 Technology Way Latrobe PA 15650