FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUL -2 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K32378

1. Entity Name
FISCHER U.S.A., INC.

DO NOT WRITE IN THIS SPACE

300006274453--4
-07/09/02--01044--004
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2995 Wilderness Pl	2995 Wilderness Pl
Suite, Apt. #, etc.: Suite 102	Suite, Apt. #, etc.: Suite 102
City & State: Boulder, CO	City & State: Boulder, CO
Zip: 80301 Country: USA	Zip: 80301 Country: USA

4. FEI Number: 59-2461407 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: BAUR, THOMAS

Street Address (P.O. Box Number is Not Acceptable): 100 N. Biscayne Blvd., Suite 2100

City: Miami **FL** Zip Code: 33132

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) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE	P
NAME	FISCHER, JOSEPH
STREET ADDRESS	2995 Wilderness Place, Suite 102
CITY-ST-ZIP	Boulder, CO 80301
TITLE	VP
NAME	FALKENSTEIN, GARY
STREET ADDRESS	2995 Wilderness Place, Suite 102
CITY-ST-ZIP	Boulder, CO 80301
TITLE	VP
NAME	TRELLINGER, KARL
STREET ADDRESS	2995 Wilderness Place, Suite 102
CITY-ST-ZIP	Boulder, CO 80301
TITLE	S
NAME	BAUR, THOMAS
STREET ADDRESS	100 N. Biscayne Blvd., Suite 2100
CITY-ST-ZIP	Miami, FL 33132
TITLE	TD
NAME	UNKELBACH, MICHAEL
STREET ADDRESS	Schustrasse 2
CITY-ST-ZIP	40213 Duesseldorf, Germany
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 6/30/02 305 377 3561
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #