

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M97000000885

1. Entity Name

OIRE USA, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 25 AM 11:02

Principal Place of Business

10350 BREN ROAD WEST
MINNETONKA MN 55343

Mailing Address

10350 BREN ROAD WEST
MINNETONKA MN 55343

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

41-1894300

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME BEDNAROWSKI, KEITH P
STREET ADDRESS 9900 BREN ROAD EAST, 700 OPUS CENTER
CITY-ST-ZIP MINNETONKA MN 55343

TITLE MGR ☐ Delete
NAME SCHIFERL, RONALD W
STREET ADDRESS 9900 BREN ROAD EAST, 700 OPUS CENTER
CITY-ST-ZIP MINNETONKA MN 55343

TITLE MGR ☐ Delete
NAME DECKAS, ANDREW C
STREET ADDRESS 9900 BREN ROAD EAST, 700 OPUS CENTER
CITY-ST-ZIP MINNETONKA MN 55343

TITLE MGR ☐ Delete
NAME COMPA, LUZ
STREET ADDRESS 9900 BREN ROAD EAST, 700 OPUS CENTER
CITY-ST-ZIP MINNETONKA MN 55343

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME LAU, WADE
STREET ADDRESS 10350 BREN ROAD WEST
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 10350 BREN ROAD WEST
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 10350 BREN ROAD WEST
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME MGR
STREET ADDRESS LAU, WADE
CITY-ST-ZIP 10350 BREN ROAD WEST
MINNETONKA MN 55343

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE Wade Lau

9/18/00

952 656 4644

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (5/00)