FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 06, 2002 8:00 am DOCUMENT # P03882 **Secretary of State** 1. Entity Name 02-06-2002 90002 047 ***150 00 DYWIDAG SYSTEMS INTERNATIONAL, USA, INC. Mailing Address Principal Place of Business 320 MARMON DRIVE 320 MARMON DRIVE BOLINGBROOK IL 60440 **BOLINGBROOK IL 80440** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Applied For City & State 4. FEI Number City & State 13-2635618 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criterià on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME ALLAN, ADAM S. STREET ADDRESS STREET ADORESS 320 MARMON DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOLINGBROOK IL** ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME BONOMO, RONALD J. STREET ADDRESS STREET ADDRESS 320 MARMON DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOLINGBROOK IL** ☐ Change ☐ Addition ☐ Delete TITLE TITLE ST NAME NAME KOLBECK, MAX STREET ADDRESS STREET ADDRESS 320 MARMON DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOLINGBROOK IL** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME VAN LAMMEREN, ERIC STREET ADDRESS STREET ADDRESS ERDINGER LANDSTR 1 CITY-ST-ZIP CITY-ST-ZIP ASCHHEIM, GERMANY GE Addition ☐ Delete TITLE ☐ Change TITLE NAME MUNDORF, HANNS-BERT STREET ADDRESS STREET ADDRESS **ERDINGER LANDSTR. 1** CITY-ST-ZIP CITY-ST-ZIP ASCHHEIM, GERMANY GE TITLE Change ☐ Addition TITLE ☐ Delete NAME FITZNER, WOLF E STREET ADDRESS STREET ADDRESS **ERDINGER LANDSTR 1** CITY-ST-ZIP CITY-ST-ZIP ASCHHEIM, GERMANY

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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