2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 21, 2000 8:00 am Secretary of State DOCUMENT # P17141 1. Entity Name CERRO WIRE & CABLE CO., INC. 04-21-2000 90053 026 ***150.00 Mailing Address Principal Place of Business 1099 THOMPSON RD SE 1099 THOMPSON RD SE HARTSELLE AL 35640-8471 HARTSELLE AL 35640 D0034119 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-3205325 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 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 DATE 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CD ☐ Change Addition TITLE ☐ Delete - - L TITLE PRITZKER, ROBERT A. NAME NAME STREET ADDRESS 225 W. WASHINGTON ST. STREET ADDRESS CITY-ST-ZIP CHICAGO IL CITY-ST-7IP ☐ Addition VTD Change Delete TITLE TITLE GLUTH, R.C. NAME NAME STREET ADDRESS STREET ADDRESS 225 W. WASHINGTON ST. CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL Change ☐ Addition Delete TITLE TITLE WEBB, ROBERT W. NAME NAME 225 W. WASHINGTON ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL - ... ☐ Change Addition ☐ Delete TITLE TITLE HARTLEY, MICHAEL P. NAME NAME 1099 THOMPSON RD SE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HARTSELLE AL VP FINANCE Change ☐ Addition TITI E TITLE ☐ Delete KEITH W. DHALSON NAME NAME STREET ADDRESS STREET ADDRESS ICAA THOMPSON RD SE CITY-ST-ZIP CITY-ST-ZIP HARBELLE AL 251410 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME

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

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BENEITH JUHNSON 1/10/00