FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

AUTOLIV ASP, INC.

1998

P25052

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										T ICENIARE TIO TIDOL DIVIL OBJUT BENTO HAT DIBJU OLDIY RIBJU DIBJU BIDJU BIDJU HADJU HAD	
100 N. RIVERSIDE PLAZA CHICAGO IL 60806-1596					100 N. RIVERSIDE PLAZA CHICAGO IL 60608-1596						
US					US					DO NOT WRITE IN THIS SPACE	
										3. Date Incorporated or Qualified 07/05/1989	
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For	
21 3350 AIRPORT RD.					26 3350 AIRPORT RD.					36-3640053 Not Applicable	
Suite, Apt. #, etc.					Suite, Apl. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
22 M/S A9130					27 M/S A9130					Fee Required	
City & State					City & State					6. Election Campaign Financing \$5.00 May Be	
23 OGDEN. UT					28 OGDEN, UT					Trust Fund Contribution Added to Fees	
Zip 84405			Country WEBER	<u> </u>	ир 84405		Coun 30 WEE			8. This corporation owes or has paid the current year Intangible	
24 84405	0 Nama	25 and	Address of Curr	29			30 WEE	ЬK	·	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
CT	CORPORA			one regi	stered Agont			81 Name			
			ND ROAD								
	NTATION					2 :	Street Addre	ess (P.O. Box Number is Not Acceptable)			
, ,	ווטונאווינ	rt 3	3324				1	3		1, 8 1, 2, 4 - 4 - 4 - 4	
								1			
							8	4 (City	FL 85 Zip Code	
11. Pursuant to	o the provis	ions (N Sections 607.0	502 and (07 1508 Flor	ida Štetut	es the abo		named corne	······································	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, lygod or profiled name of registered agent and tide if applicable (NOTE Registered Agent signature required when reinstating) DATE DATE											
Signature, typod or people a native of registered age of and tide if applicable. (NOTE Reg. 12. OFFICERS AND DIRECTORS								gant	signatura requiru		
TITLE	CCE		OF FIGERS F	אוט טוונ		DELETE	13.		DD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PECT DENT Addition Addition	
NAME	STEWA	RT S	VAI.		W .,	,,,,,,,	1.2 NAM		- 1	TEOLDENI —	
STREET ADDRESS	BARR LAVE DOAD								DORESS	CANT	
i i	CITY-ST-ZIP LAKE FOREST IL								l l		
TITLE	Ý	-,			K I	DELET E	1.4 CITY 2.1 TITL			CE DESCENDENTE Change Addition	
NAME	Ŝ TANLE	Y. J/	AMES R.				2.2 NAM			CE-LKESTDENI X	
STREET ADDRESS	ALC LOCOT COURT								000000	OMAS G. HARTMAN	
CITY-ST-ZIP	LAVE DILICE II								3U:	51 S. 1450 E.	
TITLE	VCFO				K (DELETE	2. 4 CIT		100	DEN, UT Change Addition	
NAME		Π. Ι	HOMAS F.			•	3.2 NAM		l l	EASURER	
STREET ADDRESS 1201 EAGLE COURT										CQUES M. CROISETIERE	
CITY-ST-ZIP	WHEAT						3.5 STR		7IP 189	95 N. BEECHWOOD DR.	
TITLE	8				K (ELETE	4.1 TITL		LA	YTON, UT Change Addition	
NAME	PHELPS	, P. I	MICHAEL		A .		4. 2 NAM			CRETARY	
STREET ADDRESS			TNUT, APT.10	3			4.3 STRI		DRESS H.	STEVEN HOISINGTON	
CITY-ST-ZIP	CHICAG		-				4.4 CITY		104	64 27th ST., OGDEN, UT	
TITLE	P					ELETE	51 TITL			Change X Addition	
NAME	IOLINIOTONI SINILIANI E					5.2 NA				51. IKEASUKEK	
STREET ADDRESS 155 N. HARBOR DR.									DDCGG	AN C. WOOLF	
CITY-ST-ZIP	CHICAG	O IL					5.4 CITY		004	20 S. 2575 E., SOUTH WEBER, UTAH	
TITLE	1				K	ELETE	6.1 TiTL			ICE PRESIDENT Change 🙀 Addition	
NAME	WOLFE,						6.2 NAM	E	1	GER TEA	
STREET ADDRESS			EST RD				6.3 STR	ET AD		28 N. 300 E.	
CITY-ST-ZIP	DOWNE	RS G	ROVE IL				6.4 CITY			NTERVILLE, UT	

14. 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 annual report of supplemental annual 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 opporation or the receiver or rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.