2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Jan 26, 2001 8:00 am Secretary of State **DOCUMENT # P25052** AUTOLIV ASP. INC. 01-26-2001 90147 030 ***150.00 Principal Place of Business Mailing Address 3350 AIRPORT RD 3350 AIRPORT RD MS A9130 M/S A9130 U U U U I -OGDEN UT 84405 OGDEN UT 84405 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-3640053 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete Change ☐ Addition TITLE HARTMAN, THOMAS G. NAME NAME STREET ADDRESS 5051 S. 1450 E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OGDEN UT ☐ Delete ☐ Addition TITLE TITLE Change ANDERSON, MICHAEL S NAME NAME STREET ADDRESS 2910 WATERVIEW DRIVE STREET ADDRESS CITY-ST-ZIP **ROCHESTER HILLS MI 48309** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change WOOLF, RYAN C NAME NAME STREET ADDRESS 8020 S 2575 E STREET ADDRESS CITY-ST-ZIP SOUTH WEBER UT CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HOISINGTON, H. STEVEN NAME NAME STREET ADDRESS 1864 27TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OGDEN UT ☐ Delete TITLE ☐ Change ☐ Addition HANSEN, STEVEN A NAME STREET ADDRESS 2025 PRINCETON DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SALT LAKE CITY UT ☐ Delete TITLE Change ☐ Addition NAME TEA, ROGER D NAME STREET ADDRESS 1128 N 300 E STREET ADDRESS CITY-ST-ZIP CENTERVILLE LAT 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 received or trustee empowered to execute this lebort 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.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR