FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
AND
FILED

95 MAY -1 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 820927 (2)

1. Corporate Name
OMC LATIN AMERICA/CARIBBEAN, INC.

Principal Place of Business
100 SEA HORSE DRIVE
WAUKEGAN ILLINOIS 60085-9195

Mailing Address
100 SEA HORSE DRIVE
WAUKEGAN ILLINOIS 60085-9195

DO NOT WRITE IN THIS SPACE

3. Date Incorporated/Qualified: 11/29/1967
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business
21

2a. Mailing Address
26

Apply Agent #
22

Apply Agent #
27

City & State
23

City & State
28

24 25 29 30

4. FEI Number: 36-2536154
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. Is the corporation indebted to the state for any tax under Chapter 220, Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, 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. I/we further certify that the corporation has complied with the applicable provisions of Section 607.0505, Florida Statutes.

Signature

12. Officer/Director Name and Address

Title	V
Name	BADDELEY, D J
Address	100 SEA HORSE DR
City-State-Zip	WAUKEGAN IL
Title	CD
Name	RANDOLPH, R.D.
Address	100 SEA HORSE DR
City-State-Zip	WAUKEGAN IL
Title	PD
Name	CARTADE, R M
Address	403 SAWGRASS COP PKWY
City-State-Zip	SUNRISE FL
Title	VD
Name	JENSEN, R.J.
Address	100 SEA HORSE DR
City-State-Zip	WAUKEGAN IL
Title	VS
Name	MALOVANY, H.
Address	100 SEAHORSE DR
City-State-Zip	WAUKEGAN IL
Title	
Name	
Address	
City-State-Zip	

13. Additional Changes to Officers and Directors

☐ Delete ☐ Add

CD X Change ☐ Add
BOWMAN, H.W.
100 SEA-HORSE DRIVE
WAUKEGAN-IL 60085

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

14. I/We hereby certify that the information supplied with this report is true and accurate and that, unless amended prior to the date this report is received by the Department of State, this information is true and accurate on the date of delivery. I am aware that any false information submitted in a document to the Department of State for purposes of obtaining a state certificate or authorization may subject me to criminal penalties. I am also aware that I am required to sign this report as required by Chapter 607, Florida Statutes, and that my signature on this report may subject me to criminal penalties.

SIGNATURE: H. MALOVANY, V.P. & SECRETARY 4-28-95 708-689-7157
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0444409 FP