

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001519

FILED
Apr 21, 2004
Secretary of State

Entity Name: HILTI CARIBE, INC.

Current Principal Place of Business:

5400 SOUTH 122ND EAST AVE.
TULSA, OK 74146

New Principal Place of Business:

Current Mailing Address:

5400 SOUTH 122ND EAST AVE.
TULSA, OK 74146

New Mailing Address:

FEI Number: 73-1354723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EVERT, CARY
Address: 5400 SOUTH 122ND EAST AVE.
City-St-Zip: TULSA, OK 74146

Title: DS () Delete
Name: BEAVER, KELLY L
Address: 5400 SOUTH 122ND EAST AVE.
City-St-Zip: TULSA, OK 74146

Title: VPF () Delete
Name: WALLNER, WERNER
Address: 5400 SOUTH 122ND EAST AVE.
City-St-Zip: TULSA, OK 74146

Title: AS () Delete
Name: SIRES, DAVID
Address: 5400 S. 122ND E AVE
City-St-Zip: TULSA, OK 74146

Title: AS () Delete
Name: HUGHES, MARY
Address: 5400 S 122ND E AVE
City-St-Zip: TULSA, OK 74146

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPO () Change (X) Addition
Name: TINDLE, SCOTT
Address: 5400 S 122ND E AVE
City-St-Zip: TULSA, OK 74146

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SIRES

AS

04/21/2004

Electronic Signature of Signing Officer or Director

Date