

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

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P03882

1. Corporation Name

DYWIDAG SYSTEMS INTERNATIONAL, USA, INC.

Principal Place of Business

320 MARMON DRIVE
BOLINGBROOK IL 60440

Mailing Address

320 MARMON DRIVE
BOLINGBROOK IL 60440

FILED

99 MAY -7 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05/07/99 90129 036 \$150.00.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/30/1984	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		13-2635618	
24 Country		29 Country		Applied For	
				Not Applicable	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324				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 Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P BROWNING, JOHN H.	1.1 TITLE	Senior Vice President
NAME	320 MARMON DRIVE	1.2 NAME	Adam S. Allan
STREET ADDRESS	BOLINGBROOK IL	1.3 STREET ADDRESS	320 Marmon Drive
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Bolingbrook, IL 60440
TITLE	V BONOMO, RONALD J.	2.1 TITLE	ST
NAME	320 MARMON DRIVE	2.2 NAME	Max Kolbeck
STREET ADDRESS	BOLINGBROOK IL	2.3 STREET ADDRESS	320 Marmon Drive
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Bolingbrook, IL 60440
TITLE	ST BOWE, JOHN W.	3.1 TITLE	Director
NAME	320 MARMON DRIVE	3.2 NAME	Eric van Lammeren
STREET ADDRESS	BOLINGBROOK IL	3.3 STREET ADDRESS	Erdinger Landstr. 1
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Aschheim, Germany
TITLE	D SPULER, NIKOLAUS	4.1 TITLE	Diretor
NAME	ERDINGER LANDSTR 1	4.2 NAME	Wolf E. Fitzner
STREET ADDRESS	ASCHHEIM GE	4.3 STREET ADDRESS	Erdinger Landstr. 1
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Aschheim, Germany
TITLE	O MUNDORF, HANNS-BERT	5.1 TITLE	Director
NAME	ERDINGER LANDSTR. 1	5.2 NAME	Dieter Mayer
STREET ADDRESS	ASCHHEIM GE	5.3 STREET ADDRESS	Erdinger Landstr. 1
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Aschheim, Germany
TITLE	D SPANNING, DR. G.	6.1 TITLE	
NAME	ERDINGER LANDSTR 1	6.2 NAME	
STREET ADDRESS	MUNICH, WEST GERMANY	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 or 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

 MAX KOLBECK

4/27/99 (630) 739-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)