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- + \$25.00

FORM 18 Mandatory

Foreign Business Corporation Annual Report

Required under sec. <u>180.1622</u>, Wis. Stats.

Data in this report becomes public and might be used for purposes other than for which it was originally collected.

1	Name of entity:								
Fo	ormed under the laws of:								
2									
	Name of the registered agent and registered Name:		Address:						
			City:		State:	Zip:			
Re	equired Registered Agen	t Email			·				
3	Principal office address:		Address:						
			City:		State:	Zip:			
4	4 Name and business address of each director and principal officer (attach additional pages as needed)					<u>.</u>			
Nar	me:		Address:						
	Director Offi	cer	City:		State:	Zip:			
Name:			Address:						
$\overline{\mathbb{L}}$	Director Off	icer	City:		State:	Zip:			
Name:			Address:						
	Director Off	icer	City:		State:	Zip:			
Name:			Address:						
Director Officer			City:		State:	Zip:			
Name:			Address:						
	Director Offi	cer	City:		State:	Zip:			
5									
6 Enter the information for all authorized shares (attach additional pages as needed)									
Class (Common or Preferred)		Series (if any)	Number of Shares Authorized	Number of Shares Issued	Number of Shares Outstanding	Par Value (per share)			
_	·	·	·	·	·				

7 CAPITAL REPRESENTATION IN WISCONSIN

Using the table below, compute the highest proportion of the corporation's capital that is or was represented in Wisconsin (by property located and business transacted in this state) during the preceding year. For purposes of this report, the information provided must be current as of the close of the foreign corporation's fiscal year in the 12 months ending on the September 30 immediately before the date on which the annual report is due

Α.	A. Proportion of capital within Wisconsin							
	(1)	Gross business in all jurisdictions:	\$					
	(2)	Total property in all jurisdictions:	\$					
	(3)	Total of lines A(1) and A(2):		 \$				
	(4)	Gross business in Wisconsin:	\$					
	(5)	Total property in Wisconsin:	\$					
	(6)	Total of lines A(4) and A(5):		 \$				
	(7)	Divide line A(6) by line A(3) and enter		-				
	` '	the result as a percentage:		_	%			
		of shares issued with par value						
CO		e this section if the corporation has issued shares with p	ar value.					
	(1)	Total value of issued shares of par-value stock,	•					
	(0)	computed at par:	\$					
	(2)	Paid-in capital in excess of par, applicable						
	(0)	to issued shares of par value stock:	Ş					
	(3)	Total of lines B(1) and B(2):		\$_				
C.	Value	of shares issued without par value						
	(1)	Total property in all jurisdictions:						
	\- /	This is the same number as line A(2) above	Ś					
	(2)	Total liabilities, other than capital stock	Ψ					
	(-/	without par value:	Ś					
	(3)	Subtract line C(2) from line C(1), and	Ψ					
	(0)	enter the result:	Ś					
	(4)	Subtract line B(3) from line C(3), and	Ψ					
	(' /	enter the result:	Ś					
	(5)	Multiply the total number of shares issued	Υ					
	(5)	without par value by 10, and enter the result:	¢					
	(6)	Enter the GREATER of line C(4) or line C(5):	ν	\$				
	(0)	Enter the GNEATER of time of the original of the		Ψ_				
D.	Capita	l representation in Wisconsin						
	(1)	Total of lines B(3) and C(6):	\$					
	(2)	Multiply line D(1) by the percentage						
		entered on line A(7):		\$_				
8	COI	MPUTATION OF FILING FEE						
Α.	The co	orporation's highest capital representation in Wisconsir	n					
		the period of the final report (from item 6, line D(2) abo		Ś				
		the period of the intarreport (itom item o) inte 2(2) and	01 0).	Y		-		
В.	Enter	the amount of capital representation on which a fee ha	as been					
		viously paid to the Department.	as 2001.	Ś				
		figure is shown on the entity's corporate records		*		•		
		e, which is accessible via the Department's website,						
		ne field labeled "Paid Capital Represented."						
	,,,,	regicia labelea Tula capital nepresentea.						
C.	Subtr	act line B from line A and enter the result.		\$		-		
D.		sum on line C is positive , compute a fee of \$3 for each						
		any part thereof) of that sum and enter the result. If the	ne sum					
	ent	ered in line C is negative , enter zero.		\$		=		
_	455	Alex hara Citiza for a f						
Ł.	ADD	the base filing fee of		\$	80.00	<u>ī</u>		
F.	The s	um of lines D and E is the FILING FEE		>	\$			

9	I certify that the entity has not entered into any contract, combination (in the form of a trust or otherwise), or conspiracy in restraint of trade or commerce.				
Printed Name:		Title:			
Signa	ature:	Date:			

Mailing Address:

State of WI-Dept. of Financial Institutions Box 93348 Milwaukee WI 53293-0348

Optional Expedited Service Add \$25.00