

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000080

Entity Name: BMW (US) HOLDING CORP.

FILED
Apr 14, 2011
Secretary of State

Current Principal Place of Business:

300 CHESTNUT RIDGE ROAD
WOODCLIFF LAKE, NJ 07677

New Principal Place of Business:

Current Mailing Address:

PO BOX 1227
ATTENTION: TAX DEPT
WESTWOOD, NJ 076751227

New Mailing Address:

FEI Number: 22-2013053

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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: O'DONNELL, JIM
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: EVP
Name: SENGEWALD, STEFAN
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: V
Name: HELSING, CRAIG
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: T
Name: HERR, JOACHIM
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: S
Name: HARRIS, HOWARD S
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

Title: AS
Name: WIECZOREK, FRANK
Address: 300 CHESTNUT RIDGE ROAD
City-St-Zip: WOODCLIFF LAKE, NJ 07677

I hereby 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 all other like empowered.

SIGNATURE: FRANK WIECZOREK

AS

04/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date