

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002833

FILED
Mar 20, 2007
Secretary of State

Entity Name: LLOYD'S REGISTER QUALITY ASSURANCE, INC.

Current Principal Place of Business:

1401 ENCLAVE PKWY., SUITE 200
HOUSTON, TX 77077 US

New Principal Place of Business:

Current Mailing Address:

1401 ENCLAVE PKWY., SUITE 200
HOUSTON, TX 77077 US

New Mailing Address:

FEI Number: 76-0647352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PURI, ATUL
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

Title: S () Delete
Name: GRILL, DONNA
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

Title: T () Delete
Name: SIMMONS, BEVERLY
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

Title: D () Delete
Name: HUBER, PAUL
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

Title: D () Delete
Name: CORBETT, DAVID
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: CROCKETT, BEVERLY
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

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

Title: D (X) Change () Addition
Name: CORBETT, DAVID
Address: 1401 ENCLAVE PKWY., SUITE 200
City-St-Zip: HOUSTON, TX 77077

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BEVERLY CROCKETT

MGR

03/20/2007

Electronic Signature of Signing Officer or Director

_____ Date