2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F01000002833

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

FILED May 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1401 ENCLAVE PKWY., SUITE 200 HOUSTON, TX 77077 **Current Mailing Address: New Mailing Address:** 1401 ENCLAVE PKWY., SUITE 200 HOUSTON, TX 77077 FEI Number: 76-0647352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SMITH, ANDREW J Name: Name: SMITH, ANDREW J 1401 ENCLAVE PKWY., SUITE 200 1401 ENCLAVE PKWY., SUITE 200 Address: Address: City-St-Zip: HOUSTON, TX 77077 City-St-Zip: HOUSTON, TX 77077 Title: Title: () Delete () Change () Addition Name: GRILL, DONNA Name: 1401 ENCLAVE PKWY., SUITE 200 Address: Address: HOUSTON, TX 77077 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CROCKETT, BEVERLY Name: Name: 1401 ENCLAVE PKWY., SUITE 200 Address: Address: City-St-Zip: HOUSTON, TX 77077 City-St-Zip: Title: () Delete Title: () Change () Addition ALLER, JOHN E Name: Name: Address: 1401 ENCLAVE PKWY., SUITE 200 Address: City-St-Zip: HOUSTON, TX 77077 City-St-Zip: Title: Title: () Delete () Change () Addition HODGSKINSON, IAN Name: Name: 1401 ENCLAVE PKWY., SUITE 200 Address: Address: City-St-Zip: HOUSTON, TX 77077 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: SWAYZE, TERESA A 1401 ENCLAVE PARKWAY, SUITE 200 Address: Address: City-St-Zip: City-St-Zip: HOUSTON, TX 77077

I hereby certify that the information supplied with this filing does not qualify 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: ANDREW J SMITH D 05/14/2008