

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000001418

**Entity Name:** STUDSVIK SCANDPOWER, INC.**Current Principal Place of Business:**300 NORTH THIRD ST.  
SUITE 400  
WILMINGTON, NC 28401-4099**Current Mailing Address:**300 NORTH THIRD ST.  
SUITE 400  
WILMINGTON, NC 28401-4099 US**FEI Number:** 36-3088916**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	PRESIDENT
Name	MATOS, RUI
Address	300 NORTH THIRD ST. SUITE 400
City-State-Zip:	WILMINGTON NC 28401-4099

Title	CHAIRMAN
Name	MONOMEN, MICHAEL
Address	300 NORTH THIRD ST. SUITE 400
City-State-Zip:	WILMINGTON NC 28401-4099

Title	DIRECTOR
Name	EDENIUS, MALTE
Address	300 NORTH THIRD ST. SUITE 400
City-State-Zip:	WILMINGTON NC 28401-4099

Title	TREASURER
Name	MATOS, RUI
Address	300 NORTH THIRD ST. SUITE 400
City-State-Zip:	WILMINGTON NC 28401-4099

Title	SECRETARY
Name	RHODES, JOEL III
Address	300 NORTH THIRD ST. SUITE 400
City-State-Zip:	WILMINGTON NC 28401-4099

*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:** RUI MATOS

PRESIDENT

04/12/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date