

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003979

Entity Name: SMITHS INTERCONNECT AMERICAS, INC.**Current Principal Place of Business:**5101 RICHLAND AVE
KANSAS CITY, KS 66106**Current Mailing Address:**5101 RICHLAND AVE
KANSAS CITY, KS 66106 US**FEI Number:** 20-8764590**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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	DIR
Name	BOMBA, KAREN
Address	11-12 ST JAMES'S SQUARE
City-State-Zip:	LONDON UK SW1Y 4LB

Title	DIRECTOR, VP, SECRETARY
Name	LAKIN, ERIC
Address	11-12, ST. JAMES'S SQUARE
City-State-Zip:	LONDON SW1Y 4LB

Title	PRES
Name	MATOS, DOM
Address	8851 SW OLD KANSAS AVENUE
City-State-Zip:	STUART FL 34997

Title	VP
Name	O'CONNELL, DEANNA
Address	5200 UPPER METRO PLACE
City-State-Zip:	DUBLIN OH 43017

Title	TREA
Name	MITCHELL, BRIAN
Address	5101 RICHLAND AVE
City-State-Zip:	KANSAS CITY KS 66106

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: BRIAN MITCHELL**TREASURER****01/23/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date