

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000974

FILED
Jul 28, 2008
Secretary of State

Entity Name: DASSAULT SYSTEMES ENOVIA CORP.

Current Principal Place of Business:

900 CHELMSFORD STREET
TOWER 2, FLOOR 5
LOWELL, MA 01851

New Principal Place of Business:

Current Mailing Address:

900 CHELMSFORD STREET
TOWER 2, FLOOR 5
LOWELL, MA 01851

New Mailing Address:

FEI Number: 02-0372301

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEMKE, JOEL
Address: 210 LITTLETON ROAD
City-St-Zip: WESTFORD, MA 08116

Title: D () Delete
Name: DECLEE, STEPHANE
Address: 210 LITTLETON ROAD
City-St-Zip: WESTFORD, MA 08116

Title: TCFO () Delete
Name: MONCHAL, LUDOVIC
Address: 210 LITTLETON ROAD
City-St-Zip: WESTFORD, MA 08116

Title: S () Delete
Name: DEAN, DEBORAH
Address: 210 LITTLETON RD
City-St-Zip: WESTFORD, MA 08116

Title: D () Delete
Name: SEGAL, MIKE
Address: 273 NORTH SHORE ROAD
City-St-Zip: WESTFORD, MA 08116

Title: D () Delete
Name: EMMRICH, TOM
Address: 900 CHELMSFORD STREET
City-St-Zip: LOWELL, MA 01851

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEMKE, JOEL
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

Title: D (X) Change () Addition
Name: DECLEE, STEPHANE
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

Title: TCFO (X) Change () Addition
Name: MONCHAL, LUDOVIC
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

Title: S (X) Change () Addition
Name: DEAN, DEBORAH
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

Title: D (X) Change () Addition
Name: SEGAL, MIKE
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

Title: D (X) Change () Addition
Name: EMMRICH, TOM
Address: 900 CHELMSFORD STREET, TOWER 2, FLOOR 5
City-St-Zip: LOWELL, MA 01851

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: MARY ZEH

PARA

07/28/2008

Electronic Signature of Signing Officer or Director

Date