

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001250

FILED
Jan 23, 2007
Secretary of State

Entity Name: ASTRAZENECA AB

Current Principal Place of Business:

S-151
85
SODERTALJE, XX XXXXX SW

New Principal Place of Business:

Current Mailing Address:

S-151
85
SODERTALJE, XX XXXXX SW

New Mailing Address:

FEI Number: 98-0192371 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BRENNAN, DAVID R
Address: 15 STANHOPE GATE
City-St-Zip: LONDON, W1K 1LN, ENGLAND, XX XXXXX EN

Title: D () Delete
Name: NICKLASSON, MARTIN
Address: S-431 83
City-St-Zip: MOLNDAL, SWEDEN, XX XXXXX SW

Title: D () Delete
Name: KVARNSTROM, ANN CHRISTIN
Address: S-151 85
City-St-Zip: SODERTALJE, SWEDEN, XX XXXXX SW

Title: D () Delete
Name: LARSSON, CLAES ANDERS
Address: S-151 85
City-St-Zip: SODERTALJE, SWEDEN, XX XXXXX SW

Title: D () Delete
Name: LUNDBERG, JAN MAGNUS
Address: S-151 85
City-St-Zip: SODERTALJE SWEDEN, XX XXXXX SW

Title: D () Delete
Name: PERSSON, MARIA
Address: S-221 87
City-St-Zip: LUND, SWEDEN, XX XXXXX SW

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: S (X) Change () Addition
Name: LINDE, JOHANNES
Address: S-151 85
City-St-Zip: SODERTALJE SWEDEN, XX XXXXX SW

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

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: JOHANNES LINDE

S

01/23/2007

Electronic Signature of Signing Officer or Director

Date