

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001250

FILED  
Mar 04, 2011  
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

**OFFICERS AND DIRECTORS:**

Title: C/D  
Name: BRENNAN, DAVID R  
Address: 2 KINGDOM STREET  
City-St-Zip: LONDON, W2 6BD, ENGLAND, XX XXXXX EN

Title: CEO  
Name: EKBLOM, ANDERS  
Address: S-151 85  
City-St-Zip: SODERTALJE, XX XXXXX SW

Title: CFO  
Name: JACKE ANDERS, JAN-OLOF  
Address: S-431 83  
City-St-Zip: MOLNDAL, XX XXXXX SW

Title: D  
Name: VIKDAL, ANDERS  
Address: S-151 85  
City-St-Zip: SODERTALJE, XX XXXXX SW

Title: S  
Name: BUREN, ANDERS  
Address: S-151 85  
City-St-Zip: SODERTALJE, XX XXXXX SW

Title: D  
Name: HOEG, STEINAR  
Address: S-151 85  
City-St-Zip: SODERTALJE, XX XXXXX SW

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: ANDERS BUREN

S

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date