2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000199

Entity Name: FLEXTRONICS INTERNATIONAL USA, INC.

FILED Jun 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	TUNE DRIVE E, CA 95131					
Current Mailing Address:			New Maili	ng Address:		
	RLOCKEN PA ELD, CO 800					
FEI Number	94-3061570	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
1200 SOU	PORATION SY TH PINE ISLA ON, FL 3332	ND RD.				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,		
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent	Date		
		93(2)(b), F.S., the corporation did no	ot receive the prior notic	e.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (MCNAMARA, I 2090 FORTUN SAN JOSE, CA	IE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	STANDLEY, D	CKEN PARKWAY	Title: Name: Address: City-St-Zip:	V (X) Change () Addition STANDLEY, DONALD 2090 FORTUNE DRIVE SAN JOSE, CA 95131		
Title: Name: Address: City-St-Zip:	CFOD (READ, PAUL 2090 FORTUN SAN JOSE, CA		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S (STEWART, TII 847 GILBRAL MILPITAS, CA	M ΓAR DRIVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition STEWART, TIMOTHY 2090 FORTUNE DRIVE SAN JOSE, CA 95131		
Title: Name: Address: City-St-Zip:	D (COLLIER, CHI 2090 FORTUN SAN JOSE, CA	IE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: ANNE MEYER POA 06/23/2009