2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Secretary of State DOCUMENT # F02000006013 02-01-2007 90035 024 ***150.00 1. Entity Name ASML US, INC. Principal Place of Business Mailing Address 40008453 8555 SOUTH RIVER PARKWAY 8555 SOUTH RIVER PARKWAY TEMPE, AZ 85284 TEMPE, AZ 85284 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 CR2E034 (12/06) Cha-P Applied For City & State City & State 4. FEI Number Not Applicable 77-0568140 Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete ☐ Change M Addition TITLE TITLE CRABTREE, DONALD R NAME NAME STREET ADDRESS 8555 SOUTH RIVER PARKWAY STREET ADDRESS TEMPE, AZ 85284 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE NAME ROELOFS, ROBERT STREET ADDRESS **DERUN 1110, 5503 LA** STREET ADDRESS VELDHOVEN, THE NETHERLANDS, CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE MEURICE, ERIC NAME STREET ADDRESS **DE RUN 6501** STREET ADDRESS CITY-\$T-ZIP VELDHOVEN, NETHERLANDS, NT 5504 dr CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE WENNINK, PETER T.F.M. NAME NAME STREET ADDRESS **DE RUN 6501** STREET ADDRESS CITY-ST-ZIP VELDHOVEN, NETHERLANDS, NT 5504 dr CITY-ST-ZIP Treasurer ☐ Change **₹** Addition Delete TITLE TITLE Michael D. Holdaway TUKKER, CHRISTINA NAME NAME 8555 S. RIVER PKWY 8555 South River Parkway STREET ADDRESS STREET ADDRESS TEMPE, AZ 85284 CITY-ST-7/P CITY-ST-ZIP Tempe, AZ 85284 ☐ Addition ☐ Delete ☐ Change TITLE TITLE AS KIM, DAVID NAME NAME STREET ADDRESS 8555 S RIVER PARKWAY STREET ADDRESS CITY-ST-ZIP TEMPE, AZ 85284 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

David Kim, Asst. Sec.

FILED Feb 01, 2007 8:00 am

480-383-4024

Daytime Phone #

Date