

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006570

Entity Name: PEH US HOLDINGS, INC.

FILED
May 02, 2011
Secretary of State

Current Principal Place of Business:

360 N CRESCENT DR SOUTH BLDG
BEVERLY HILLS, CA 90210

New Principal Place of Business:

Current Mailing Address:

360 N CRESCENT DR SOUTH BLDG
BEVERLY HILLS, CA 90210

New Mailing Address:

FEI Number: 95-4703968

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: DVPS
Name: KALAWSKI, EVA M
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: P
Name: GORES, TOM
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: VP
Name: SIGLER, MARY ANN
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: VPT
Name: JOUBRAN, ROBERT J
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: AS
Name: WARD, SALLY A
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: AT
Name: WALLOCH, DAWN
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

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: SALLY A. WARD

AS

05/02/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date