2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2012
Secretary of State

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Entity Name: KLOPOTEK NORTH AMERICA, INC.

Current Principal Place of Business:

2001 ROUTE 46
SUITE 203
PARSIPPANY, NJ 07054

New Principal Place of Business:

Current Mailing Address:

2001 ROUTE 46
SUITE 203
PARSIPPANY, NJ 07054

New Mailing Address:

FEI Number: 20-1960039 **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: DP
Name: KLOPOTEK, ULRICH
Address: SCHLUETERSTR. 39
City-St-Zip: 10629 BERLIN, GERMANY, XX XX

Title: DST
Name: JARVIS, LISA
Address: 2001 ROUTE 46, STE. 203
City-St-Zip: PARSIPPANY, NJ 07054

Title: DCFO
Name: ECKERMANN, MICHAEL
Address: SCHLUETERSTR. 39
City-St-Zip: 10629 BERLIN, GERMANY, XX

Title: D
Name: WOLF, GREGOR
Address: SCHLUETERSTR. 39
City-St-Zip: 10629 BERLIN, GERMANY, XX

Title: VP
Name: LEHRHAUPT, SUSAN
Address: 2001 ROUTE 46, STE. 203
City-St-Zip: PARSIPPANY, NJ 07054

Title: AS
Name: AMES, SARAH
Address: 525 W. MONROE ST., STE. 2360
City-St-Zip: CHICAGO, IL 60661

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: SARAH AMES AS 01/11/2012

Electronic Signature of Signing Officer or Director — Date