

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F08000003170

FILED
Jun 23, 2009
Secretary of State**Entity Name:** ST-ERICSSON INC.**Current Principal Place of Business:**1109 MCKAY DRIVE
SAN JOSE, CA 95131**New Principal Place of Business:**1310 ELECTRONICS DRIVE
CARROLLTON, TX 75006**Current Mailing Address:**1109 MCKAY DRIVE
SAN JOSE, CA 95131**New Mailing Address:**1310 ELECTRONICS DRIVE
CARROLLTON, TX 75006**FEI Number:** 26-2785282**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US**Name and Address of New Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION, FL 33324 US

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: MARIA OZAETA

06/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: HAMMER, MIKE
Address: 1109 MCKAY DRIVE
City-St-Zip: SAN JOSE, CA 95131**Title:** S () Delete
Name: GALIONE, BILL
Address: 1109 MCKAY DRIVE
City-St-Zip: SAN JOSE, CA 95131**Title:** D () Delete
Name: GALIONE, BILL
Address: 1109 MCKAY DRIVE
City-St-Zip: SAN JOSE, CA 95131**Title:** D (X) Delete
Name: HAMMER, MIKE
Address: 1109 MCKAY DRIVE
City-St-Zip: SAN JOSE, CA 95131**Title:** D (X) Delete
Name: OHLIN, KEN
Address: 1109 MCKAY DRIVE
City-St-Zip: SAN JOSE, CA 95131**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: HAMMER, MIKE
Address: 1310 ELECTRONICS DRIVE
City-St-Zip: CARROLLTON, TX 75006**Title:** S (X) Change () Addition
Name: GALIONE, BILL
Address: 1310 ELECTRONICS DRIVE
City-St-Zip: CARROLLTON, TX 75006**Title:** O (X) Change () Addition
Name: OHLIN, KENNETH
Address: 1310 ELECTRONICS DRIVE
City-St-Zip: CARROLLTON, TX 75006**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM GALIONE

SEC

06/23/2009

Electronic Signature of Signing Officer or Director

Date