2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIS

DOCUMENT # F9600001462 05 APR 21 AM 11:51 1. Entity Name SCALA NORTH AMERICA, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 300 INTENATIONAL PKWY 300 INTENATIONAL PKWY **STE 230** STE 230 HEATHROW, FL 32746 HEATHROW, FL 32746 3. Mailing Address 18200 Von Karman 2. Principal Place of Business 18200 Von Karman Suite, Apt. #, etc. Suite Apt # etc. 03212005 Chg-P CR2E034 (10/03) 1000 1000 City & State Applied For 4. FEI Number alifornia alifornia Irvine 65-0658776 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired \Box 92612 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Corporation Service Company ANGELL CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) ONE NORTH CLEMATIS STREET **SUITE 400** WEST PALM BEACH, FL 33401-0000 1201 Hays Street Tallahassee 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 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, 2005 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. President TITLE S 💢 Delete TITLE **X** Addition SOKOL, ALBERT L Michael Piraino 1820 Von Karman #1000 NAME NAME STREET ADDRESS %EDWARDS & ANGELL, 101 FEDERAL ST STREET ADDRESS CITY-ST-7IP BOSTON, MA 02110 CITY-ST-7IP Invine, colif. 92612 TITLE X Delete Secretary John D. Ireland Change TITLE Addition NAME HAAS, ERIK NAME 300 INTERNATIONAL PKWY STE 230 18200 Von Karman #1000 Irvine, Calif. 92612 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE MARY, FL 32746 CITY-ST-ZIP Controller TITLE Delete TITLE Addition Robin Meyer 18200 Von Karman #1000 LARACUENTE, CATHIE NAME NAME 300 INTERNATIONAL PKWY #230 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HEATHROW, FL 32746 CITY-ST-ZIP Irvine, CA 92612 Delete 000054037120 Change TITLE TITLE Addition NAME NAME 05/09/05--01013--020 **150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an alkaonment with an addrass, with all other like empowered.