## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jan 22, 2008 8:00 am Secretary of State DOCUMENT # F98000005315 01-22-2008 90045 045 \*\*\*150.00 LMA NORTH AMERICA, INC. Principal Place of Business Mailing Address 4660 LAJOLLA VILLAGE DR STE 900 4660 LAJOLLA VILLAGE DR STE 900 SAN DIEGO, CA 92122 SAN DIEGO, CA 92122 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01112008 Chg-P Applied For City & State City & State 4. FEI Number 33-0785550 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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\_ DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D C. Change . ☐ Addition TITLE TITLE ☐ Delete SWETE, TREVOR NAME NAME 4660 LAJOLLA VILLAGE DR. STE. 900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN DIEGO, CA 92122 VPCS TITLE ☐ Change ☐ Addition TITLE Delete WARFORD, MICHAEL NAME NAME 4660 LAJOLLA VILLAGE DRIVE ST 900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAN DIEGO, CA 92122 CITY-ST-ZIP O TITLE **PCEO** ☐ Delete TITLE Change Addition NAME BLOCK, STEVEN NAME STREET ADDRESS STREET ADDRESS 4660 LAJOLLA VILLAGE DR. STE 900 CITY - ST - ZIP CITY-ST-ZIP SAN DIEGO, CA 92122 ☐ Change Delete TITLE Addition TITLE NAME COOPER, JANE G NAME STREET ADDRESS STREET ADDRESS 4660 LAJOLLA VILLAGE DR STE. 900 CITY-ST-ZIP SAN DIEGO, CA 92122 CITY-ST-ZIP TITLE Change Addition TITLE D Delete NAME BRIANT, MICHAEL NAME STREET ADDRESS STREET ADDRESS 4660 LAJOLLA VILLAGE DR. STE. 900 CITY-ST-ZIP CITY-ST-ZIP SAN DIEGO, CA 92122 TITLE ☐ Change ☐ Addition Delete TITLE NAME MENDELL, STEVEN NAME

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

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

helial R. W SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI S OFFICER OR DIRECTOR

4660 LAJOLLA VILLAGE DR. STE. 900

SAN DIEGO, CA 92122

(858)622-540

**FILED**