

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005315

Entity Name: LMA NORTH AMERICA, INC.

FILED
Jan 04, 2011
Secretary of State

Current Principal Place of Business:

4660 LAJOLLA VILLAGE DR STE 900
SAN DIEGO, CA 92122

New Principal Place of Business:

Current Mailing Address:

4660 LAJOLLA VILLAGE DR STE 900
SAN DIEGO, CA 92122

New Mailing Address:

FEI Number: 33-0785550

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: D
Name: SWETE, TREVOR
Address: 4660 LAJOLLA VILLAGE DR. STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: VPCS
Name: WARFORD, MICHAEL
Address: 4660 LAJOLLA VILLAGE DRIVE ST 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D
Name: BLOCK, STEVEN
Address: 4660 LAJOLLA VILLAGE DR. STE 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D
Name: COOPER, JANE G
Address: 4660 LAJOLLA VILLAGE DR STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: D
Name: BRIANT, MICHAEL
Address: 4660 LAJOLLA VILLAGE DR. STE. 900
City-St-Zip: SAN DIEGO, CA 92122

Title: CEO
Name: BLOCK, STEVEN
Address: 4660 LA JOLLA VILLAGE DR., STE. 900
City-St-Zip: SAN DIEGO, CA 92122

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: MICHAEL WARFORD

VPCS

01/04/2011

Electronic Signature of Signing Officer or Director

Date