

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F99000006396

Entity Name: SL USA CORPORATION

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

251 RIVERSIDE AVENUE  
WESTPORT, CT 06880

**New Principal Place of Business:**

**Current Mailing Address:**

251 RIVERSIDE AVENUE  
WESTPORT, CT 06880

**New Mailing Address:**

FEI Number: 13-3745130

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 32301 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: CEO  
Name: BOENICKE, NILS  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

Title: S/T  
Name: MAHONEY, PETER  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

Title: SVP  
Name: ENDERS, RALF  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

Title: SVP  
Name: VERDE, RALPH  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

Title: VP  
Name: MCELROY, SUSAN  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

Title: D  
Name: STARCK, DR. MARTIN  
Address: 251 RIVERSIDE AVENUE  
City-St-Zip: WESTPORT, CT 06880

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: PETER MAHONEY

S/T

04/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date