

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006209

FILED
Jul 15, 2009
Secretary of State

Entity Name: PACOM SYSTEMS (NORTH AMERICA) INC.

Current Principal Place of Business:

339 INTERSTATE BLVD
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

339 INTERSTATE BLVD
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 52-2336000 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE REHFELDT GROUP
3201 26TH STREET WEST
BRADENTON, FL 34205 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TANGUAY, DEREK R MR
Address: 339 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240 US

Title: V () Delete
Name: GRIFFITH, ANDREW J MR
Address: 339 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240 US

Title: D () Delete
Name: NORBERG, ROLF MR
Address: LINDHAGENSPLAN 70
City-St-Zip: STOCKHOLM, . SE-102 26 SE

Title: D () Delete
Name: JONSSON, MAGNUS MR
Address: UNIT 6, 40 CARRINGTON ROAD
City-St-Zip: CASTLE HILL, . 2154 AU

Title: D () Delete
Name: BARTON, STEVE MR
Address: UNIT 6, 40 CARRINGTON ROAD
City-St-Zip: CASTLE HILL, . 2154 AU

Title: D (X) Delete
Name: CURRAN, PATRICK MR
Address: RODING HOUSE, 970 ROMFORD ROAD
City-St-Zip: LONDON, . E12 5LP UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: WHITE, HUGH J MR
Address: 339 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240 US

Title: D (X) Change () Addition
Name: GRIFFITH, ANDREW J MR
Address: 339 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANDREW GRIFFITH

D

07/15/2009

Electronic Signature of Signing Officer or Director

_____ Date