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|--|---|
| 1.) CORPORATION NAME:<br><b>Technicolor USA, Inc.</b>  | DUE DATE: <b>6/30/2013</b>  |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>REGISTERED AGENT SOLUTIONS INC<br/>7288 HANOVER GREEN DR<br/>MECHANICSVILLE, VA</b> | SCC ID NO: <b>F0598195</b>  |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HANOVER COUNTY</b>   | 5.) STOCK INFORMATION<br>CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>DE</b>  |   |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 101 W 103RD ST  
MS INH 3394

CITY/ST/ZIP: INDIANAPOLIS, IN 46290

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: FREDERIC ROSE                            | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: PRESIDENT                               |                                     |         |                          |          |
| ADDRESS: 1, RUE JEANNE D'ARC                   |                                     |         |                          |          |
| CITY/ST/ZIP/CO: ISSY-LES-MOULINEAUX, 92443, FR |                                     |         |                          |          |

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: STEPHEN ALLAMANNO                | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: VP-US TAX                       |                                     |         |                          |          |
| ADDRESS: 101 W 103RD ST                |                                     |         |                          |          |
| CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46290 |                                     |         |                          |          |

|  |                                     |         |                                     |          |
|--|-------------------------------------|---------|-------------------------------------|----------|
| NAME: MEGGAN EHRET                     | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: SECRETARY                       |                                     |         |                                     |          |
| ADDRESS: 101 W 103RD ST                |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46290 |                                     |         |                                     |          |

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: JAMES CULLEN                     | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| TITLE: TREASURER                       |                                     |         |                          |          |
| ADDRESS: 101 W 103RD ST                |                                     |         |                          |          |
| CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46290 |                                     |         |                          |          |

|                                     |                          |         |                                     |          |
|-------------------------------------|--------------------------|---------|-------------------------------------|----------|
| NAME: MARY COLLIER                  | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: DIRECTOR                     |                          |         |                                     |          |
| ADDRESS: 3233 E MISSION OAKS BLVD   |                          |         |                                     |          |
| CITY/ST/ZIP/CO: CAMARILLO, CA 93012 |                          |         |                                     |          |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |   |           |
|---|---|-----------|
| /s/ STEPHEN ALLAMANNO                               | STEPHEN ALLAMANNO, VP-US                | 6/27/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | TAX<br>PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.