



LIMITED LIABILITY COMPANY ANNUAL REPORT

NAME OF LIMITED LIABILITY COMPANY: *Farmtrac North America, LLC*

STATE OF INCORPORATION: *DE*

SECRETARY OF STATE R.L.L.P. ID NUMBER: *0473178*

FEDERAL EMPLOYER ID NUMBER: XXXXXXXXXX

NATURE OF BUSINESS: *Mfg. & Wholesaler of farm equipment*

REGISTERED AGENT: *Corporation Service Company*

REGISTERED OFFICE MAILING ADDRESS: *327 Hillsborough St.
Raleigh, NC 27603*

REGISTERED OFFICE STREET ADDRESS: *327 Hillsborough St
Raleigh, NC 27601 Wake County*

SIGNATURE OF THE NEW REGISTERED AGENT: _____

SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

PRINCIPAL OFFICE TELEPHONE NUMBER: *(252) 823-4151*

PRINCIPAL OFFICE MAILING ADDRESS: *111 Fairview St.
Tarboro, NC 27886*

PRINCIPAL OFFICE STREET ADDRESS: *111 Fairview St.
Tarboro, NC 27886*

MANAGERS/MEMBERS/ORGANIZERS:

Name: *Rajan Nanda*
Title: *MANAGER*
Address: *1515 Mathura Rd*
City: *FARIDABAD*
State: *INDIA* Zip: *121003*

Name: *ALTON H. Cobb Jr.*
Title: *MANAGER*
Address: *111 Fairview St.*
City: *TARBORO*
State: *NC* Zip: *27886*

Name: _____
Title: _____
Address: _____
City: _____
State: _____ Zip: _____

CERTIFICATION OF ANNUAL REPORT MUST BE COMPLETED BY ALL LIMITED LIABILITY COMPANIES

ALTON H. Cobb, Jr.

FORM MUST BE SIGNED BY A MANAGER/MEMBER

TYPE OR PRINT NAME

9/1/06

DATE

Mgr.

TYPE OR PRINT TITLE

ANNUAL REPORT FEE: \$200 MAIL TO: Secretary of State • Corporations Division • Post Office Box 29525 • Raleigh, NC 27626-0525

