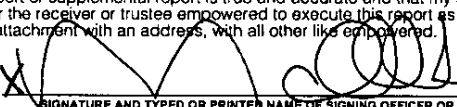


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90035 034 ***158.75

DOCUMENT # 841560 1. Entity Name CALEB BRETT U.S.A., INC.					
Principal Place of Business 2200 W. LOOP S., SUITE 200 ATTN: CHRISTIE SORENSON HOUSTON, TX 77027 US			Mailing Address 2200 W. LOOP S., SUITE 200 ATTN: CHRISTIE SORENSON HOUSTON, TX 77027 US		
2. Principal Place of Business ATTN: Julieta Alzate		3. Mailing Address ATTN: Julieta Alzate			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State 		City & State 			
Zip 		Country 		Zip 	
Country 		Country 		4. FEI Number 72-0703433	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MACKIN, BRENT V. 524 VASSAR AVENUE SWARTHMORE, PA 19081	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROUSELL, KIM P 135 OAKLAND CT. GARYVILLE, LA	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEES, GRAHAM 19710 CARDIFF PARK LANE HOUSTON, TX 77094	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO GUTIERREZ, LEO 179 E LANSLOWNE CIRCLE THE WOODLANDS, TX 77382	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTO/D Gutierrez, Leo ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUTIERREZ, JAY 310 PINNACLE COVE CT. LEAGUE CITY, TX 77573	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DORNAK, MARK 9422 SPEARMAN HOUSTON, TX 77040	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 				1/14/06 713-407-3500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	

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01162006 Chg-P CR2E034 (11/05)