

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000006204

FILED
Nov 14, 2007
Secretary of State**Entity Name:** FMI INTERNATIONAL CORP.**Current Principal Place of Business:**800 FEDERAL BLVD.
CARTERET, NJ 07008**New Principal Place of Business:****Current Mailing Address:**800 FEDERAL BLVD.
CARTERET, NJ 07008**New Mailing Address:****FEI Number:** 22-3412303**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: DESAYE, GREGORY
Address: 800 FEDERAL BLVD.
City-St-Zip: CARTERET, NJ 07008

Title: P () Delete
Name: O'NEILL, ROBERT
Address: 800 FEDERAL BLVD.
City-St-Zip: CARTERET, NJ 07008

Title: COO (X) Delete
Name: DESAYE, MICHAEL
Address: 800 FEDERAL BLVD.
City-St-Zip: CARTERET, NJ 07008

Title: CFO () Delete
Name: DEVINE, NEIL
Address: 800 FEDERAL BLVD.
City-St-Zip: CARTERET, NJ 07008

Title: S () Delete
Name: CANGELOSI, JOSEPH
Address: 800 FEDERAL BLVD.
City-St-Zip: CARTERET, NJ 07008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: JOSEPH CANGELOSI

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11/14/2007

Electronic Signature of Signing Officer or Director_____
Date