

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002831

Entity Name: PREVOST CAR (US) INC.

FILED
Feb 03, 2008
Secretary of State

Current Principal Place of Business:

6931 BUSINESS PARK BLVD. NORTH
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

201 SOUTH AVENUE
SOUTH PLAINFIELD, NJ 07080 US

New Mailing Address:

FEI Number: 14-1768147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOLDUC, GAETAN
Address: 1167 KENNEDY STREET ST. JOSEPH
City-St-Zip: QC, G0S 2VO CA

Title: D () Delete
Name: KARLSSON, HAKAL
Address: HANGESTEUGEN 27
City-St-Zip: VASTRA FROLUNDA, SWEDEN, CA

Title: S () Delete
Name: BOUTTE, GILLES
Address: 1516 PAMPHILE LEMAY
City-St-Zip: QUEBEC, CN QC G1Y 3C CA

Title: D () Delete
Name: ELMEILDT, HERBERT
Address: BILLDALS LOVSKOGSUAG
City-St-Zip: BILLDAL SWEDEN, UK

Title: D () Delete
Name: BACKSTROM, TORE
Address: ASCHEBERGSGATAN
City-St-Zip: GOTEBOG,

Title: D () Delete
Name: LINDQUIST, PER MARTEN
Address: 80400 VBA2
City-St-Zip: GOTHENBURG SWEDEN, GB

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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:

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: LOIS MCDERMOTT

DA

02/03/2008

Electronic Signature of Signing Officer or Director

Date