



2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90211 001 ***150.00

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DOCUMENT # F0600007470			
1. Entity Name BUREAU VERITAS CERTIFICATION NORTH AMERICA, INC.		Principal Place of Business 11860 W STATE ROAD 84, STE 1 FT. LAUDERDALE, FL 33325	
Mailing Address 11860 W STATE ROAD 84, STE 1 FT. LAUDERDALE, FL 33325		2. Principal Place of Business - No P.O. Box #	
3. Mailing Address c/o ORRICK, ATTN: B. HAIMES		Suite, Apt. #, etc. 666 FIFTH AVE., #2139	
City & State NEW YORK, NY		4. FEI Number 13-3609204	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 10103	Country USA	6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
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 _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00	
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE CHRD	NAME PIEDELIEVRE, FRANK	<input type="checkbox"/> Delete	TITLE D
STREET ADDRESS 17 BIS, PL DES REFLETS - LA DEFENSE 2	CITY-ST-ZIP 92400 COURBEVOIE FRANCE,		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE P	NAME GAPPIN, JEAN-MICHEL	<input checked="" type="checkbox"/> Delete	TITLE SVP
STREET ADDRESS 11860 W STATE ROAD 84, STE 1	CITY-ST-ZIP FT. LAUDERDALE, FL 33325		NAME RZONCA, GREGORY P
			STREET ADDRESS 580 WATERS EDGE, SUITE 210
			CITY-ST-ZIP LOMBARD, IL 60148
TITLE TD	NAME TARDAN, FRANCOIS	<input type="checkbox"/> Delete	TITLE P
STREET ADDRESS 17 BIS, PL DES REFLETS-LA DEFENSE 2	CITY-ST-ZIP 92400 COURBEVOIE, FRANCE,		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE CEO	NAME WRIGHT, DICKERSON C	<input type="checkbox"/> Delete	TITLE EVP
STREET ADDRESS 7895 CONVOY CT #18	CITY-ST-ZIP SAN DIEGO, CA 92111		NAME TONG, RICHARD
			STREET ADDRESS 11860 W STATE ROAD 84, STE 1
			CITY-ST-ZIP FT. LAUDERDALE, FL 33325
TITLE V	NAME O'BRIEN, KEVIN EXECUT	<input type="checkbox"/> Delete	TITLE EVP
STREET ADDRESS 100 NORTHPOINTE PARKWAY	CITY-ST-ZIP BUFFALO, NY 14228		NAME O'BRIEN, KEVIN EXECUT
			STREET ADDRESS
			CITY-ST-ZIP
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: 		Burton K. Haimés	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4-26-07	
		Daytime Phone # (212) 506-5055	

ATTACHMENT
40086700

DOCUMENT #F06000007470

Entity Name: BUREAU VERITAS CERTIFICATION NORTH AMERICA, INC.

Annex to Florida 2007 For Profit Corporation Annual Report

Block 11 – Additional Officer

Title	FINANCIAL CONTROLLER
Name	DAMASCENO, LUIS
Address	11860 W. STATE ROAD 84, STE. 1 FORT LAUDERDALE, FL 33325

Title	SECRETARY
Name	HAIMES, BURTON K.
Address	C/O ORRICK, 666 FIFTH AVE., #2139 NEW YORK, NY 10103