
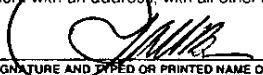


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90054 026 ***150.00

DOCUMENT # F94000003118			
1. Entity Name INFILCO DEGREMONT, INC.			
Principal Place of Business 8007 DISCOVERY DRIVE RICHMOND, VA 23229 US		Mailing Address 8007 DISCOVERY DRIVE RICHMOND, VA 23229 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address POST OFFICE BOX 71390 Suite, Apt. #, etc.	
City & State RICHMOND VIRGINIA		4. FEI Number 22-2023093	
Zip 23255-1390		Country USA.	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		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 NAME STREET ADDRESS CITY-ST-ZIP	PD LUCY, VERNON D III 8007 DISCOVERY DRIVE RICHMOND, VA 23229 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUCE, JACK N JR. 8007 DISCOVERY DRIVE RICHMOND, VA 23229 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAYER, GLEN I 8007 DISCOVERY DRIVE RICHMOND, VA 23229 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERVET, BRUNO 183 AVENUE DU 18 JUIN 1940 RUEIL-MALMAISON, FRANCE, 92508 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOD HAUCHECORNE, MARC 8007 DISCOVERY DRIVE RICHMOND, VA 23229 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO / DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C LANIER, REMI 8007 DISCOVERY DRIVE RICHMOND, VA 23229 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 183 AVENUE DU 18 JUIN 1940 RUEIL - MALMAISON FRANCE 92508
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 		J.N. BRUCE JR. 03/28/2005 (804) 756-7657	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

ATTACHMENT # F9-4000003118
50032625-

Infilco Degremont, Inc.

Attachment to Florida Uniform Business Report (UBR) 2005

Thierry Mallet

Director

183 avenue du 18 juin 1940
92508 Rueil-Malmaison
France