2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112233

Entity Name: BRICAN AMERICA INC.

Title:

Name:

Address

City-St-Zip:

() Delete

FILED May 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1 E BROWARD BLVD SUITE 700 5301 BLUE LAGOON DRIVE FT LAUDERDALE, FL 33301 SUITE 520 MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** 1 E BROWARD BLVD SUITE 700 5301 BLUE LAGOON DRIVE FT LAUDERDALE, FL 33301 SUITE 520 MIAMI, FL 33126 FEI Number: 98-0433443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VINCENS, JEFF 5301 BLUE LAGOON DRIVE SUITE 520 MIAMI, FL 33126 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition GOLDSTEIN, LAURENT GOLDSTEIN, LAURENT Name: Name: 13071 VANIER PL SUITE 230 13071 VANIER PL SUITE 230 Address: Address: City-St-Zip: RICHMOND BC CANADA V6V 2J1, City-St-Zip: RICHMOND BC, CANADA, BC V6V2J1 CA Title: Title: () Delete (X) Change () Addition Name: VINCENS, JEFF Name: VINCENS, JEFF 1545 RN 7 MARINA 7 1545 RN 7 MARINA 7 Address: Address: 06270 VILLENEUVE LOUBET, FR, FR 06270 FR 06270 VILLENEUVE LOUBET FRAN, City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JACQUES LEMACON D 05/25/2006

() Change (X) Addition

ST-LAZARE, QC, CANADA, QC J7T3E4 CA

LEMACON, JACQUES

2260 PLANTATION