

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000065218

**FILED**  
**Oct 16, 2007**  
**Secretary of State**

**Entity Name:** WORCESTER ENTERPRISES USA, INC.

**Current Principal Place of Business:**

4221 W. BOY SCOUT BLVD  
10TH FLOOR  
TAMPA, FL 33607 US

**New Principal Place of Business:**

18 WYNFORD DRIVE  
SUITE 403  
TORONTO, ON M3C 3S2 CA

**Current Mailing Address:**

4221 W. BOY SCOUT BLVD  
10TH FLOOR  
TAMPA, FL 33607

**New Mailing Address:**

18 WYNFORD DRIVE  
SUITE 403  
TORONTO, ON M3C 3S2 CA

**FEI Number:** 65-0518009

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CFRA, LLC  
4221 W. BOY SCOUT BLVD  
10TH FLOOR  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

BANTUBO, JOYCE CFRA,  
4221 W. BOY SCOUT BLVD  
10TH FLOOR  
TAMPA, FL 33607 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: JOYCE BANTUBO

10/16/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DS ( ) Delete  
Name: BULMAN, MARINA  
Address: 20 FARRINGTON DRIVE  
City-St-Zip: TORONTO, ON M2L 2B6 CA

Title: DP ( ) Delete  
Name: MALKINE, VITALI  
Address: 20 FARRINGTON DRIVE  
City-St-Zip: TORONTO, ON M2L 2B6 CA

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MARINA BULMAN

DS

10/16/2007

Electronic Signature of Signing Officer or Director

Date