2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# 855938

Entity Name: HILTI LATIN AMERICA LIMITED, INC.

Current Principal Place of Business:

5400 S. 122ND E AVE.
P.O.BOX 21148
TULSA, OK 74121

New Principal Place of Business:

Current Mailing Address:

5400 S. 122ND E AVE.
P.O.BOX 21148
TULSA, OK 74121

New Mailing Address:

FEI Number: 73-1100930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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:	S	( ) Delete
Name:	BEAVER, KELLY	
Address:	5400 S. 122ND E AVE.	
City-St-Zip:	TULSA, OK 74146	
Title:	VPF	( ) Delete
Name:	MORENO, FERNANDO	
Address:	5400 S 122ND E AVE	
City-St-Zip:	TULSA, OK 74146	
Title:	P	( ) Delete
Name:	EVERT, CARY	
Address:	5400 S 122ND E AVE.	
City-St-Zip:	TULSA, OK 74146	
Title:	AS	( ) Delete
Name:	SIRES, DAVID	
Address:	5400 S 122ND E AVENUE	
City-St-Zip:	TULSA, OK 74146	
Title:	AS	( ) Delete
Name:	HUGHES, MARY	
Address:	5400 S 122ND E AVE	
City-St-Zip:	TULSA, OK 74146	
Title:	VPO	( ) Delete
Name:	TINDLE, SCOTT	
Address:	5400 S 122ND E AVE	
City-St-Zip:	TULSA, OK 74146	

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:	
Title:	( ) Change ( ) Addition
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 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: DAVID SIRES AS 04/18/2006

Electronic Signature of Signing Officer or Director — Date