2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000005258

1. Entity Name

PIPE & PILING CONCRETE U.S.A. CO.



Principal Place of Business

% PIPE & PILING SUPPLIES LTD. 5025 RAMSAY STREET, ST-HUBERT, QUEBEC CANADA J3Y-2S3, XX Mailing Address

% PIPE & PILING SUPPLIES LTD. 5025 RAMSAY STREET, ST-HUBERT, QUEBEC CANADA J3Y-2S3, XX FILED Sep 05, 2006 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

08282006 No Chg-P CR2E034 (11/05)

4. FEI Number 98-0233554

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 DO NOT WRITE IN THIS SPACE

				3. 多可一类中和基础系统等(14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
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			red Agent signature required when reinstating)	DATE
FILE NOWIII FEE IS \$550.00 Due by September 6, 2006 9. Election Campaign Finar Trust Fund Contribution.		- +		
10.	OFFICERS AND DIREC	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DYM, JACK 5205 RAMSAY STREET, ST-HUBERT CANADA J3Y-2S3,	, QUEBEC		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				000000576038 \09/05/06-80006-014 550:00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				THIS SPACE
TITLE NAME 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 trusted ambowered 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 autorities with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND WPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Au, 28, 2006

450-445-0050

Daytime Phone #