## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000006099

Entity Name: CIRQUE DU SOLEIL HOLDING USA, INC.

FILED Mar 14, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Ourient i inicipal i lace of Dasiness.	Mew i interpart race or business

3300 LAS VEGAS BLVD., SOUTH 980 KELLY JOHNSON DRIVE 980 KELLY JOHNSON DR. LAS VEGAS, NV 89119 LAS VEGAS, NV 89119

**New Mailing Address: Current Mailing Address:** 

8400 2ND AVE 8400 2ND AVE

MONTREAL, QUEBEC, CA h12 4m6 MONTREAL, QUEBEC, XX H1Z 4M6 CA

FEI Number: 88-0355679 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BLAIN, ROBERT BLAIN, ROBERT 1478 ÉAST BUENA VISTA DR. 1478 EAST BUENA VISTA DRIVE US LAKE BUENA VISTA, FL 32830 LAKE BUENA VISTA, FL 32830

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: 03/14/2005

> Electronic Signature of Registered Agent Date

> > Title:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

PCD

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DCFO

() Delete (X) Change ( ) Addition LALIBERTE, GUY Name: Name: LALIBERTE, GUY 8400 2ND AVENUE 8400 2ND AVENUE Address: Address:

City-St-Zip: MONTREAL QUEBEC, CANADA, City-St-Zip: MONTREAL (QUEBEC), XX H1Z 4M6 CA

Title: **VTAS** Title: ( ) Delete (X) Change ( ) Addition BLAIN, ROBERT Name: Name: BLAIN, ROBERT 8400 2ND AVENUE 8400 2ND AVENUE Address: Address: MONTREAL, CANADA, MONTREAL (QUEBEC), XX H1Z 4M6 CA City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition **VPS** DESCHAMPS, JEAN LVC MACEROLA, FRANCOIS Name: Name:

8400 2ND AVENUE 8400 2ND AVENUE Address: Address:

City-St-Zip: MOTREAL QUEBEC, CA H12 4M6 City-St-Zip: MONTREAL (QUEBEC), XX H1Z 4M6 CA

Title: ( ) Delete Title: PCOO ( ) Change (X) Addition

LAMARRE, DANIEL Name: Name: Address: Address: 8400 2ND AVENUE

City-St-Zip: City-St-Zip: MONTREAL (QUEBEC), XX H1Z 4M6

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANCOIS MACEROLA S 03/14/2005