


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000001689 1. Entity Name THERMAL ENGINEERING INTERNATIONAL (USA) INC.	
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Principal Place of Business 10375 SLUSHER DRIVE SANTA FE SPRINGS, CA 90670	Mailing Address 10375 SLUSHER DRIVE SANTA FE SPRINGS, CA 90670
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02072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 95-2535124	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PHILLIPS, GEORGE T 10375 SLUSHER DRIVE SANTA FE SPRINGS, CA 90670
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VCOO MURAKOSHI, KEN 10375 SLUSHER DRIVE SANTA DE SPRINGS, CA 90760
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAT LEEMAN, SCOTT 55 FERNCROFT ROAD, SUITE 210 DANVERS, MA 01923
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOOD, JAMES F 55 FERNCROFT ROAD, SUITE 210 DANVERS, MA 01923
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRANDANO, ANTHONY 55 FERNCROFT ROAD, SUITE 210 DANVERS, MA 01923
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRANTL, JAMES S 55 FERNCROFT ROAD, SUITE 210 DANVERS, MA 01923

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02/14/05-80007-004 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Goodrich **2/7/05 (323) 838-1120**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #