

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2007 08:00 A
Secretary of State

DOCUMENT # F03000001689

1. Entity Name
THERMAL ENGINEERING INTERNATIONAL (USA) INC.



Principal Place of Business
**10375 SLUSHER DRIVE
SANTA FE SPRINGS, CA 90670**

Mailing Address
**10375 SLUSHER DRIVE
SANTA FE SPRINGS, CA 90670**



02062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
95-2535124

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U000000641905
03/01/07-80018-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KOENIG, JON R
STREET ADDRESS	10375 SLUSHER DRIVE
CITY-ST-ZIP	SANTA FE SPRINGS, CA 90670
TITLE	VP
NAME	MURAKOSHI, KENNETH
STREET ADDRESS	10375 SLUSHER DRIVE
CITY-ST-ZIP	SANTA DE SPRINGS, CA 90760
TITLE	VAT
NAME	LEEMAN, SCOTT
STREET ADDRESS	55 FERN CROFT ROAD, SUITE 210
CITY-ST-ZIP	DANVERS, MA 01923
TITLE	D
NAME	WOOD, JAMES F
STREET ADDRESS	55 FERN CROFT ROAD, SUITE 210
CITY-ST-ZIP	DANVERS, MA 01923
TITLE	D
NAME	BRANDANO, ANTHONY
STREET ADDRESS	55 FERN CROFT ROAD, SUITE 210
CITY-ST-ZIP	DANVERS, MA 01923
TITLE	D
NAME	BRANTL, JAMES S
STREET ADDRESS	55 FERN CROFT ROAD, SUITE 210
CITY-ST-ZIP	DANVERS, MA 01923

**DO NOT WRITE
IN THIS SPACE**

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 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 Goodwin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Goodwin, VP Finance

2-8-2007

Date

(323) 838-1120

Daytime Phone #