


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F03000002805</b>	
1. Entity Name FFE MINERALS USA INC.	

Principal Place of Business 3235 SCHOENERSVILLE RD. BETHLEHEM, PA 18017-2103	Mailing Address 3235 SCHOENERSVILLE RD. BETHLEHEM, PA 18017-2103
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**DO NOT WRITE IN THIS SPACE**



03272006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>23-2798183</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP ROBLES, GEORGE 3235 SCHOENERSVILLE RD. BETHLEHEM, PA 180172103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP MERTZ, JOHN F 3235 SCHOENERSVILLE RD. BETHLEHEM, PA 180172103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MERTZ, JOHN F 3235 SCHOENERSVILLE RD. BETHLEHEM, PA 180172103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BENNICOFF, MARY BETH 3235 SCHOENERSVILLE ROAD BETHLEHEM, PA 180172103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: <u>John F. Mertz</u> (John F. Mertz) SUP+CEO	Date: <u>3 Apr 2006</u>	Daytime Phone #: <u>610-264-6900</u>
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