## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000005250

Entity Name: NORTH AMERICAN ENERGY SERVICES COMPANY

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1180 NW MAPLE STREET, SUITE 200 ISSAQUAH, WA 98029							
Current Mailing Address:			New Maili	New Mailing Address:			
	APLE STREET , WA 98029	, SUITE 200					
FEI Number: 91-1111672 FEI Number Applied For ( ) FEI Number			FEI Number Not Appl	ber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US							
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:							
	Electronic	: Signature of Registered Ager	nt	Date			
Election Cam	paign Financing 1	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D MAEDA, SHIGEKI 335 MADISON AV NEW YORK, NY	/E.	Title: Name: Address: City-St-Zip:	()C	hange ( ) Addition		
Title: Name: Address: City-St-Zip:	D () D RABBAT, MOUNIF 335 MADISON AV NEW YORK, NY	/E.	Title: Name: Address: City-St-Zip:	()C	hange()Addition		
Title: Name: Address: City-St-Zip:	C () D HOSHINO, AKIRA 335 MADISON AV NEW YORK, NY	/E.	Title: Name: Address: City-St-Zip:	()C	hange()Addition		
Title: Name: Address: City-St-Zip:	NEALE, STUART	STREET, STE 200	Title: Name: Address: City-St-Zip:	()C	hange()Addition		
Title: Name: Address: City-St-Zip:	SELIGER, KENNE	STREET, STE. 200	Title: Name: Address: City-St-Zip:	DENOVA, THOMA	STREET, STE. 200		
Title: Name: Address: City-St-Zip:	AMBUR, KENNET	STREET, STE 200	Title: Name: Address: City-St-Zip:	( )C	hange()Addition		
I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or							

SIGNATURE: KENNETH AMBUR CCS 01/18/2008

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.