

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006444

Entity Name: GL&V USA INC.

FILED  
Apr 26, 2006  
Secretary of State

## Current Principal Place of Business:

175 CRYSTAL STREET  
LENOX, MA 01240

## New Principal Place of Business:

## Current Mailing Address:

175 CRYSTAL STREET  
LENOX, MA 01240

## New Mailing Address:

2850 SOUTH DECKER LAKE DRIVE  
SALT LAKE CITY, UT 84119

FEI Number: 58-2517780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VERREAULT, LAURENT  
1300 SOUTH OCEAN BLVD. #704  
POMPANO BEACH, FL 33062 US

## Name and Address of New Registered Agent:

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 Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: VERREAULT, LAURENT  
Address: 1300 SOUTH OCEAN BLVD., SUITE 704  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: VERREAULT, RICHARD  
Address: 10 CORPORATE DRIVE, SUITE 203  
City-St-Zip: BEDFORD, NH 031105956

Title: V ( ) Delete  
Name: MAHONEY, BILL  
Address: 141 BURKE STREET  
City-St-Zip: NASHUA, NH 03060

Title: SD ( ) Delete  
Name: SAULNIER, BILL W  
Address: 25 DES FORGES STREET, SUITE 420  
City-St-Zip: TROIS-RIVIERES, CANADA, QC G9A6A7

Title: V (X) Delete  
Name: LEPINE, PIERRE  
Address: 1550 METCALFE STREET, SUITE 600  
City-St-Zip: MONTREAL CANADA, QC H3A1X6

Title: V ( ) Delete  
Name: BARBEAU, MARC  
Address: 1550 METCALFE STREET, SUITE 600  
City-St-Zip: MONTREAL CANADA, QC H3A1X6

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BILL MAHONEY

V

04/26/2006

Electronic Signature of Signing Officer or Director

Date