

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002386

FILED
Apr 30, 2006
Secretary of State

Entity Name: FINANCIERE HAMELIN CO

Current Principal Place of Business:

7 RUE SCHEFFER
75116 PARIS-FRANCE, OC

New Principal Place of Business:

7 RUE SCHEFFER
75116 PARIS-FRANCE, FL 75116 OC

Current Mailing Address:

P.B. WILDLIFE, INC.
P.O. BOX 07132
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 98-0446798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCANLAN, BRIAN
3715 LIBERTY SQUARE
FORT MYERS, FL 33908 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: CP () Delete
Name: DE LANGSDORFF, PATRICE
Address: 14 RUE HAMELIN
City-St-Zip: 75116 PARIS-FRANCE, OC

Title: VC () Delete
Name: DE LADOUCKETTE, FLORENCE
Address: 14 RUE HAMELIN
City-St-Zip: 75116 PARIS-FRANCE, OC

Title: D () Delete
Name: DE LANGSDORFF, ERIC
Address: 9 RUE DE L'AMIRAL D'ESTAING
City-St-Zip: 75116 PARIS-FRANCE, OC

Title: D () Delete
Name: ARNOULD SEURRAT DE L, A BOULAYE
Address: 9 RUE DE MONTPARNASSE
City-St-Zip: 75006 PARIS-FRANCE, OC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: DE LANGSDORFF, PATRICE
Address: 14 RUE HAMELIN
City-St-Zip: 75116 PARIS-FRANCE, FL 75116 OC

Title: VC (X) Change () Addition
Name: DE LADOUCKETTE, FLORENCE
Address: 14 RUE HAMELIN
City-St-Zip: 75116 PARIS-FRANCE, FL 75116 OC

Title: D (X) Change () Addition
Name: DE LANGSDORFF, ERIC
Address: 9 RUE DE L'AMIRAL D'ESTAING
City-St-Zip: 75116 PARIS-FRANCE, FL 75116 OC

Title: D (X) Change () Addition
Name: ARNOULD SEURRAT DE L, A BOULAYE
Address: 9 RUE DE MONTPARNASSE
City-St-Zip: 75006 PARIS-FRANCE, FL 75006 OC

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: PATRICE DELANGSDORFF

CP

04/30/2006

Electronic Signature of Signing Officer or Director

Date