2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002386

City-St-Zip:

Entity Name: FINANCIERE HAMELIN CO

FILED May 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7 RUE SCHEFFER 75116 PARIS-FRANCE, FL 75116 00**Current Mailing Address: New Mailing Address:** P.B. WILDLIFE, INC. P.O. BOX 07132 FORT MYERS, FL 33919 FEI Number: 98-0446798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCANLAN, BRIAN 3715 LIBERTY SQUARE FORT MYERS, FL 33908 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 Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition DE LANGSDORFF, PATRICE Name: Name: 14 RUE HAMELIN Address: Address: City-St-Zip: 75116 PARIS-FRANCE, FL 75116 OC City-St-Zip: Title: VC Title: () Delete () Change () Addition DE LADOUCETTE, FLORENCE Name: Name: Address: Address: 14 RUE HAMELIN 75116 PARIS-FRANCE, FL 75116 OC City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition DE LANGSDORFF, ERIC Name: Name: 9 RUE DE L'AMIRAL D'ESTAING Address: Address: 75116 PARIS-FRANCE, FL 75116 OC City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ARNOULD SEURRAT DE L, A BOULAYE Name: Name: Address: 9 RUE DE MONTPARNASSE Address:

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 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.

City-St-Zip:

SIGNATURE: PATRICE DELANGSDORFF CP 05/23/2007

75006 PARIS-FRANCE, FL 75006 OC