

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002727

FILED
Jan 14, 2008
Secretary of State

Entity Name: KREE TECHNOLOGIES USA, INC.

Current Principal Place of Business:

11429 53RD STREET NORTH
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

6200 GRANDE-ALLEE
ST-HUBERT, QC J3Y 1B6 CA

New Mailing Address:

FEI Number: 14-1811960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CEOD () Delete
Name: MOFFAT, GREGORY
Address: 85 MACEY LANE
City-St-Zip: PLATTSBURGH, NY 12901

Title: ST () Delete
Name: LAMONTAGNE, JOHANNE
Address: 3716 LOISELLE
City-St-Zip: ST-HUBERT, QC J3Y 7X4 CA

Title: D () Delete
Name: GELBER, CHARLES
Address: 4855 COTE-ST-LUC #605
City-St-Zip: MONTREAL, QC H3W 2H5 CA

Title: CFO () Delete
Name: LEPAGE, SIMON
Address: 56 AUGUSTIN
City-St-Zip: CANDIAC, QC J5R 5Y9 CA

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:

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.

SIGNATURE: SIMON LEPAGE

CFO

01/14/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date