2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003667

Entity Name: ASC CONSTRUCTION EQUIPMENT USA, INC.

FILED Feb 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
SUITE 450	IS CORNER P E, NC 28269	KWY			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
SUITE 450	IS CORNER P	KWY			
FEI Number: 2	20-1862082	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	İ	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MIEIRO, RICARE	DRNER PKWY STE 450	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COLACO, NUNO	Delete DRNER PKWY STE 450 : 28269	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BRANNON, JAME	DRNER PKWY STE 450	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MIEIRO, JOAO M	DRNER PKWY STE 450	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MIEIRO, PAULO	DRNER PKWY STE 450	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FAUSTINO, RUI	DRNER PKWY STE 450	Title: Name: Address: City-St-Zip:	() Change () 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 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: NUNO COLACO CFO 02/28/2008