

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005390

FILED
Apr 25, 2008
Secretary of State

Entity Name: PRESSURE PIPE INSPECTION COMPANY (USA) INC.

Current Principal Place of Business:

1930 W QUAIL AVE - STE A
PHOENIX, AZ 85027

New Principal Place of Business:

Current Mailing Address:

1930 W QUAIL AVE - STE A
PHOENIX, AZ 85027

New Mailing Address:

FEI Number: 86-1045618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PC () Delete
Name: MERGELAS, BRIAN J DR
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA,ONT,CAN L4W2R1, XX

Title: VC () Delete
Name: ATHERTON, DAVID L
Address: QUEENS UNIVERSITY
City-St-Zip: KINGSTON, ONT, CAN K7L3M6, XX

Title: VP () Delete
Name: JONES AS, CLIFFORD
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA,ONT,CAN L4W2R1, XX

Title: S () Delete
Name: FARLOW, TIMOTHY
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA,ONT,CAN L4W2R1, XX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: MERGELAS, BRIAN J DR
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA, ON L4W2R1 CA

Title: VC (X) Change () Addition
Name: ATHERTON, DAVID L
Address: QUEENS UNIVERSITY
City-St-Zip: KINGSTON, ON K7L3M6 CA

Title: VP (X) Change () Addition
Name: JONES AS, CLIFFORD
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA, ON L4W2R1 CA

Title: S (X) Change () Addition
Name: FARLOW, TIMOTHY
Address: 4700 DIXIE RD
City-St-Zip: MISSISSAUGA, ON L4W2R1 CA

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: TIMOTHY FARLOW

S

04/25/2008

Electronic Signature of Signing Officer or Director

Date