## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # F06000005462

1. Entity Name

FORTERRA SYSTEMS, INC.



Principal Place of Business

1855 SOUTH GRANT STREET

3RD FLOOR

SAN MATEO, CA 94402

Mailing Address

1855 SOUTH GRANT STREET

3RD FLOOR

SAN MATEO, CA 94402





01032007

No Chg-P

CR2E034 (11/05)

4. FEI Number 77-0480731

Applied For Not Applicable

5. Certificate of Status Desired

X.

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and stile if applicable. (NOTE: Registered Agent alignature required when reinstiting)  DATE						
FILE NOWI!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
11TLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO ROLSTON, DAVID 1855 SOUTH GRANT STREET - 3RD SAN MATEO, CA 94402	FLOOR		U00000651519		
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D BLOCH, ALLON 1855 SOUTH GRANT STREET - 3RD FLOOR SAN MATEO, CA 94402				000000651519 03/09/07-80010-022 158.75	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD GEHORSAM, ROBERT 1855 SOUTH GRANT STREET - 3RD FLOOR SAN MATEO, CA 94402			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WENMAN, JOHN 1855 SOUTH GRANT STREET - 3RD FLOOR SAN MATEO, CA 94402			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, HARVEY 1855 SOUTH GRANT STREET - 3RD SAN MATEO, CA 94402	FLOOR				
TITLE NAME STREET ADORESS	D WILSON, MICHAEL 1855 SOUTH GRANT STREET - 3RD	FLOOR				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SAN MATEO, CA 94402

BIONATURE AND TYPED OR PRINTED NAME OF BIONING OFFICER OR DIRECT

1-3-02

450, 433, 4082

Daytima