


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 13, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000006978 1. Entity Name WEATHERBEETA USA INC.	
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Principal Place of Business 201 MILL RD EDISON, NJ 08837	Mailing Address 201 MILL RD EDISON, NJ 08837
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DO NOT WRITE IN THIS SPACE



08012007 No Chg-P CR2E034 (11/05)

4. FEI Number 23-3545126	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000773823 09/13/07-80002-001 550.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JACKSON, ROGER 201 MILL RD EDISON, NJ 08837
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SMITH, PETER A 201 MILL RD EDISON, NJ 08837
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUCKNELL, JOSEPH 8 MONCRIEF RD NUNAWADING, VIC 313, AUSTRALIA,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BATES, RONALD 430 NEWCASTLE ST W PERTH, WA 6005, AUSTRALIA,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing 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:  **9/10/07 07327650-0025**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #