2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2008
Secretary of State

DOCUMENT# F07000006079

Entity Name: NORMET AMERICAS, INC.

Current Principal Place of Business:

5775 BLUE LAGOON DR.
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5775 BLUE LAGOON DR.
MIAMI, FL 33126

New Mailing Address:

19116 SPRING STREET
UNION GROVE, WI 53182

FEI Number: 75-3261852 **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: PD ( ) Delete
Name: ULVILA, HEIKKI
Address: 5775 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

Title: TS ( ) Delete
Name: MYLLYMAKI, JUHA
Address: 5775 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: MELBYE, TOM
Address: 5775 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: OSMALA, JARI
Address: 5775 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TS (X) Change ( ) Addition
Name: FINE, MICHAEL S
Address: 19116 SPRING STREET
City-St-Zip: UNION GROVE, WI 53182

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: MICHAEL S. FINE TS 04/02/2008

Electronic Signature of Signing Officer or Director — Date