2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001275

Entity Name: MACGREGOR (USA) INC.

FILED Jul 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6960 NW 46TH STREET 1885 STATE ROAD 84 MIAMI, FL 31666 SUITE 104 FT. LAUDERDALE, FL 33315 US **Current Mailing Address: New Mailing Address:** 14 RIDGEDALE AVENUE SUITE 205 CEDAR KNOLLS, NJ 07927 US FEI Number: 31-1359856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FINNEGAN, JOHN Name: Name: 14 RIDGEDALE AVENUE, SUITE 205 Address: Address: City-St-Zip: CEDAR KNOLLS, NJ 07927 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: JARMO TUHKANEN. Name: HALLIMEST ARINKATU 6 Address: Address: KAARINA, FI City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HEDGER, THOMAS C Name: Name: 14 RIDGEDALE AVENUE, SUITE 205 Address: Address: City-St-Zip: CEDAR KNOLLS, NJ 07927 City-St-Zip: Title: () Delete Title: () Change () Addition PETTERSSON, HANS Name: Name: Address: **BENEHAGSLIDEN 2** Address: City-St-Zip: GOTHENBURG, SD SE 400 40 City-St-Zip: Title: Title: () Delete () Change () Addition LINDSTROM, KENNETH Name: Name: HALLIMESTARINKATU 6 Address: Address: City-St-Zip: FIN-20780 KARINA, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS HEDGER ST 07/05/2005