2007 FOR PROFIT CORPORATION

	AMENDED ANI	NUAL REPO	K i				Same time:	in-	
1. Entity Nam	MENT # F96000003 trusions, inc.	644					22 PM		
			1.00	WA THE		CLLANA	ASSEE, A	STATE FLORIDA	
400 ROUSER	ICE PARK, BLDG. 2	Mailing Address AIRPORT OFFICE PARI 400 ROUSER RD. MOON TOWNSHIP, PA				1411 3 - 8170 -83171 -8 1 7	HI SOKIN OSINI ESIKI	! 	1821 II II SI
2. Principal P	ace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.			08162007	Chg-P	CR2E	CR2E034 (12/06)	
		City & State			4. FEI Numbe 58-2216			<u> </u>	pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of	of Status Desir	ed 🗆	\$8.75 Add Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of No	ew Registered	Agent	
C T CORPORATION SYSTEM				Name					
1200 SOU	TH PINE ISLAND ROAD ON, FL. 33324		Street	Street Address (P.O. Box Number is Not Acceptable)					
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			City				F	L Zip Code)
	named entity submits this statement to one of registered agent.	the purpose of changing it	s registered office	or register	red agent, or both	h, in the State	of Florida. I an	n familiar with,	and accept
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SIGNATURE.									
	Signature, typed or printed name of registered agent	nd title if applicable. (NO	TE: Registered Agent sign	nature required	d when reinstalling)		DATE		
SIGNATURE_	Signature, typed or printed name of registered agent ended AR is \$61.25	od title if applicable. (NO 9. Election Camp: Trust Fund Con	aign Financing	\$5.	d when reinstaling) .00 May Be		DATE		
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(412) 497-1000 Daytime Phone if for Marius Gronningseter and for Svein-Tore Holsether