

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006546

Entity Name: ALCATEL VACUUM PRODUCTS, INC.

FILED
Jan 30, 2008
Secretary of State

Current Principal Place of Business:

67 SHARP ST
HINGHAM, MA 02043

New Principal Place of Business:

Current Mailing Address:

67 SHARP ST
HINGHAM, MA 02043

New Mailing Address:

FEI Number: 04-2836162

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: D () Delete
Name: GUEGAN, JEAN-YVES
Address: ALLEE DU BOUVERAT, MENTHOU ST BERNAD
City-St-Zip: 74290 FRANCE,

Title: T () Delete
Name: HIGGINS, JOHN
Address: 67 SHARP ST
City-St-Zip: HINGHAM, MA 02043

Title: D () Delete
Name: DE SAINT TRIVIER, JACQUES
Address: BP69
City-St-Zip: 74000 ANNECY, FR

Title: P () Delete
Name: BYRNES, PATRICK
Address: 67 SHARP ST
City-St-Zip: HINGHAM, MA 02043

Title: S () Delete
Name: HIGGINS, JOHN
Address: 67 SHARP ST
City-St-Zip: HINGHAM, MA 02143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN HIGGINS

S

01/30/2008

Electronic Signature of Signing Officer or Director

Date