


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90400 040 ***150.00

DOCUMENT # F99000003689	
1. Entity Name DURATEX NORTH AMERICA, INC.	

Principal Place of Business 1208 EASTCHESTER DRIVE, SUITE 202 HIGH POINT, NC 27265	Mailing Address 1208 EASTCHESTER DRIVE, SUITE 202 HIGH POINT, NC 27265
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

20031835

03022006 Chg-P CR2E034 (11/05)



4. FEI Number 13-2899570	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CP <input type="checkbox"/> Delete PAULO SETUBAL NETO AV PAULISTA 1938 SAO PAULO, BRAZIL 01310-200,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV <input type="checkbox"/> Delete PLINIO DO AMARAL PINHEIRO AV PAULISTA 1938 SAO PAULO, BRAZIL 01310-200,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete WIKSTROM, GARY G 1208 EASTCHESTER DRIVE SUITE 202 HIGH POINT, NC 27265
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST <input checked="" type="checkbox"/> Delete KUSIAK, PHILP F 1208 EASTCHESTER DRIVE, SUITE 202 HIGH POINT, NC 27265
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S <input type="checkbox"/> Delete MANUBENS, ENRIQUE J AV PAULISTA 1938 SAO PAULO, BRAZIL, 01310200
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T <input type="checkbox"/> Delete DE OLIVEIRA NETO, RAUL P AV PAULISTA 1938 SAO PAULO, BRAZIL, 01310200

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ST DEJONGHE, JAN 1208 EASTCHESTER DRIVE, SUITE 202 HIGH POINT, NC 27265
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **JAN DEJONGHE, GENERAL MANAGER** **03/31/06** **336-885-1500**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #