

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003689

Entity Name: DURATEX NORTH AMERICA, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

1208 EASTCHESTER DRIVE, SUITE 202
HIGH POINT, NC 27265

New Principal Place of Business:

Current Mailing Address:

1208 EASTCHESTER DRIVE, SUITE 202
HIGH POINT, NC 27265

New Mailing Address:

FEI Number: 13-2899570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CP () Delete
Name: PAULO SETUBAL NETO,
Address: AV PAULISTA 1938
City-St-Zip: SAO PAULO, BRAZIL 01310-200, OC

Title: DV () Delete
Name: PLINIO DO AMARAL PIN, HEIRO
Address: AV PAULISTA 1938
City-St-Zip: SAO PAULO, BRAZIL 01310-200, OC

Title: D () Delete
Name: WIKSTROM, GARY G
Address: 1208 EASTCHESTER DRIVE SUITE 202
City-St-Zip: HIGH POINT, NC 27265

Title: ST () Delete
Name: DEJONGHE, JAN
Address: 1208 EASTCHESTER DR SUITE 202
City-St-Zip: HIGH POINT, NC 27265

Title: S () Delete
Name: MANUBENS, ENRIQUE J
Address: AV PAULISTA 1938
City-St-Zip: SAO PAULO, BRAZIL, 01310200

Title: T () Delete
Name: DE OLIVEIRA NETO, RAUL P
Address: AV PAULISTA 1938
City-St-Zip: SAO PAULO, BRAZIL, 01310200

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: T (X) Change () Addition
Name: CARIONI, MARCELO
Address: 1208 EASTCHESTER DR SUITE 202
City-St-Zip: HIGH POINT, NC 27265

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: MARCELO CARIONI

O

04/21/2008

Electronic Signature of Signing Officer or Director

Date