


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2008 8:00 am
Secretary of State

02-08-2008 90095 031 ***138.75

DOCUMENT # L07000045447 1. Entity Name AMAZONIA WOODS USA, LLC					
Principal Place of Business 4645 U.S. HIGHWAY 1 VERO BEACH, FL 32967			Mailing Address P.O. DRAWER 2559 VERO BEACH, FL 32961		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address P.O. Box 7122 Suite, Apt. #, etc. N/A		
City & State VERO BEACH, FL			4. FEI Number 75-3251131		
Zip 32961			Country Same		
6. Name and Address of Current Registered Agent STURGIS, CHARLES H 4645 U.S. HIGHWAY 1 VERO BEACH, FL 32967			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 <u><i>Charles H. Sturgis</i></u> RHA 1-30-2008 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STURGIS, JACK A		NAME		
STREET ADDRESS	4645 U.S. HIGHWAY 1		STREET ADDRESS		
CITY - ST - ZIP	VERO BEACH, FL 32967		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCCLOUGHLIN, NELSON E		NAME		
STREET ADDRESS	9335 FRANGIPANI DRIVE		STREET ADDRESS		
CITY - ST - ZIP	VERO BEACH, FL 32963		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Marques, Carlo		NAME		
STREET ADDRESS	6285 6th Street		STREET ADDRESS		
CITY - ST - ZIP	VERO BEACH, FL 32968		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Charles H. Sturgis</i></u> 1-30-2008 772 562 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date/Time Phone</small>					

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01212008 Chg-LLC CR2E083 (12/06)

\$5.00 Additional
Fee Required