2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041514

Entity Name: PROCTOR USA, INC.

Address:

City-St-Zip:

7856 MONARCH COURT

DELRAY BEACH, FL 33446

FILED Jan 24, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1355 W PALMETTO PARK ROAD #167 BOCA RATON, FL 33486				7856 MONARCH COURT DELRAY BEACH, FL 33446			
Current Mailing Address:				New Mailing Address:			
1355 W PALMETTO PARK ROAD #167 BOCA RATON, FL 33486				7856 MONARCH COURT DELRAY BEACH, FL 33446			
FEI Number:	65-1002141	FEI Number Appli	ied For () FEI Nu	ımber Not App	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
DELRAY E	IARCH COUF BEACH, FL 3	3446 US		- F - L - · · · · · · · · ·			
	named entity e of Florida.	submits this stater	ment for the purpose	or changing i	ts registe	red office or registered agent, or both,	
SIGNATU	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financi	ng Trust Fund Contrib	oution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LESMES, JAI 7856 MONAR			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	LESMES, JAI 7856 MONAR			Title: Name: Address: City-St-Zip:		(X) Change()Addition LUIS FELIPE KEL BAY DRIVE # 1551 _ 33131	
Title: Name:	VP (LESMES, LUI	X) Delete S FELIPE		Title: Name:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: JAIME R LESMES PD 01/24/2007