## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000009909

Entity Name: UFC AMERICA INC.

**FILED** Feb 21, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6500 N. MILITARY-TRAIL 2630 KITTBUCK WAY

WEST PALM BEACH, FL 33411 US 345

WEST PALM BEACH, FL 33407 US

**New Mailing Address: Current Mailing Address:** 

6500 N. MILITARY-TRAIL 2630 KITTBUCK WAY

WEST PALM BEACH, FL 33411 US

WEST PALM BEACH, FL 33407 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARIL, MARCEL BARIL, MARCEL

6500 N. MILITARY-TRAIL 2630 KITTBUCK WAY

WEST PALM BEACH, FL 33411 US

WEST PALM BEACH, FL 33407 US

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:

02/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/M ( ) Delete Title: (X) Change ( ) Addition

BARIL, MARCEL Name: Name: BARIL, MARCEL 2630 KITTBUCK WAY 6500 N. MILITARY-TRAIL Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33407 US City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: Title: () Change () Addition () Delete

Name: RIVARD, NATHALIE Name: 6005 COUTURE BLVD Address: Address: ST. LEONARD, QC H1P3E1 CA City-St-Zip: City-St-Zip:

( ) Delete Title: Title: () Change () Addition

RADESCHI, PASQUALE Name: Name: 6005 COUTURE BLVD Address: Address: City-St-Zip: ST. LEONARD, QC H1P3E1 CA City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

LALANCETTE, RHEO Name: Name: Address: 6005 COUTURE BLVD Address: City-St-Zip: ST. LEONARD, QC H1P3E1 CA 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: MARCEL BARIL CM 02/21/2008