

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102532

Entity Name: WESTON ARMS US, INC.

FILED
Jan 06, 2006
Secretary of State

Current Principal Place of Business:

6129 STIRLING ROAD - SUITE 2
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

6129 STIRLING ROAD - SUITE 2
DAVIE, FL 33314

New Mailing Address:

FEI Number: 11-3703718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELICIANO, ALFRED
6129 STIRLING ROAD - SUITE 2
DAVIE, FL 33314 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: CEOP () Delete
Name: FELICIANO, CARMEN
Address: 2607 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

Title: EVT () Delete
Name: FELICIANO, ALFRED
Address: 2607 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

Title: VS () Delete
Name: FELICIANO, ROBERT A
Address: 2607 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

Title: VSF () Delete
Name: FELICIANO, DAVID M
Address: 2607 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: FELICIANO, CARMEN M
Address: 2607 OAKBROOK CT
City-St-Zip: WESTON, FL 33332

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ALFRED FELICIANO

EVP

01/06/2006

Electronic Signature of Signing Officer or Director

Date