

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001352

FILED
Aug 28, 2006
Secretary of State

Entity Name: SOLAR ERECTORS U.S. INC.

Current Principal Place of Business:

10501 NW 121ST WAY
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

10501 NW 121ST WAY
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 20-0584089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, MARK
11391 NW 26TH ST
PLANTATION, FL 33323 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: CT CORPORATION

08/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRANCISOSA, LUIQI
Address: 332 JONES RD, UNIT 1
City-St-Zip: STONEY CREEK, ONTARIO CAN, L8E 5N2 OC

Title: D () Delete
Name: FRANCIOSA, MARIO
Address: 332 JONES RD, UNIT 1
City-St-Zip: STONEY CREEK, ONTARIO, CAN, L8E 5N2 OC

Title: D () Delete
Name: FRANCIOSA, DOMENIC
Address: 332 JONES RD, UNIT 1
City-St-Zip: STONEY CREEK, ONTARIO, CAN, L8E 5N2 OC

Title: D () Delete
Name: SPIEGEL, SIDNEY
Address: 132 SHEPPERD AVE. WEST, SUITE 200
City-St-Zip: NORTH YORK, ONTARIO, CAN, M2N 1M5 OC

Title: D () Delete
Name: SPIEGEL, ROBERT
Address: 132 SHEPPERD AVE. WEST, SUITE 200
City-St-Zip: NORTH YORK, ONTARIO, CAN, M2N 1M5 OC

Title: VP () Delete
Name: WHITCHER, WILLIAM
Address: 10501 NW 121ST WAY
City-St-Zip: MEDLEY, FL 33178

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: () 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: WILLIAM WHITCHER

VP

08/28/2006

Electronic Signature of Signing Officer or Director

Date