

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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

DOCUMENT# P05000047599

Entity Name: AMCAT GLOBAL INC.

Current Principal Place of Business:

11125 DARRYL DRIVE
BATON ROUGE, LA 70815

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15090
BATON ROUGE, LA 70895

New Mailing Address:

FEI Number: 98-0452591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
103 NORTH MERIDIN ST, LOWER LEVEL
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

07/21/2008

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOZECKI, ALEX
Address: 130 MONTMORENCY DR, HAMILTON, ONTARIO
City-St-Zip: L8K 6J7,

Title: V () Delete
Name: LOZECKI, MATTHEW
Address: 130 MONTMORENCY DR, HAMILTON, ONTARIO
City-St-Zip: L8K 6J7,

Title: T () Delete
Name: LOZECKI, DONNA
Address: 130 MONTMORENCY DR, HAMILTON, ONTARIO
City-St-Zip: L8K 6J7,

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:

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: ALEX LOZECKI

Electronic Signature of Signing Officer or Director

P

07/21/2008

Date