2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111470

Entity Name: FARO 1800 CORPORATION

FILED Apr 23, 2007 Secretary of State

	101 17410 1000							
Current Principal Place of Business:				New Principal Place of Business:				
1311-939 BRACEWOOD DRIVE SW, T2W 3M4 CALGARY, ALBERTA, CANADA,				15 EVERSTONE WAY SW. GALGARY ALBERTA, CANADA, C T2Y4E4				
Current Mailing Address:				New Mailing Address:				
1311-939 BRACEWOOD DRIVE SW, T2W 3M4 CALGARY, ALBERTA, CANADA,				2121 PONCE DE LEON BLVD STE 240 CORAL GABLES, FL 33134				
FEI Number:	20-4761042	FEI Number Applied F	or () FEI Nun	nber Not Appli	cable ()	Certificate of Status De	sired (X)	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
GABLES REGISTERED AGENTS CORPORATION 131 MADEIRA AVENUE CORAL GABLES, FL 33134 US				PRATS FERNANDEZ & CO, PA. 2121 PONCE DE LEON BLVD STE 240 CORAL GABLES, FL 33134 US				
The above in the State		ıbmits this statemen	t for the purpose o	f changing it	s registere	d office or registered age	nt, or both,	
SIGNATURE: PRATS FERNANDEZ & CO, PA				04/23/2007				
Electronic Signature of Registered Agent				Date				
Election Cam	paign Financing ⁻	Trust Fund Contribution	n ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Address:	GUZMAN, ROBER 1311-939 BRACE			Title: Name: Address: City-St-Zip:		(X) Change () Addition ROBERTO 'ONE WAY SW. ALBERTA, CANADA, C T2Y4I	≣4	
Title: Name: Address: City-St-Zip:	DTS () C ROBAYO, FAVIO 1311-939 BRACE CALGARY, ALBE	LA		Title: Name: Address: City-St-Zip:		(X) Change () Addition FABIOLA FONE WAY SW. ALBERTA, CANADA, C T2Y4I	≣4	

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: ROBERTO GUZMAN DPS 04/23/2007