

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035609

Entity Name: W.C.C. MASTER CARPENTER USA, INC

FILED
Jun 11, 2007
Secretary of State

Current Principal Place of Business:

11701 DEAN STREET
BONITA SPRINGS, FL 34136

New Principal Place of Business:

12870 TRADE WAY FOUR
108
BONITA SPRINGS, FL 34135-698

Current Mailing Address:

11701 DEAN STREET
BONITA SPRINGS, FL 34136

New Mailing Address:

12870 TRADE WAY FOUR
108
BONITA SPING, FL 34135-698

FEI Number: 20-4477782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABRECQUE, MICHEL
11701 DEAN STREET
BONITA SPRINGS, FL 34136 US

Name and Address of New Registered Agent:

LABRECQUE, MICHEL
12870 TRADE WAY
108
BONITA SPRINGS, FL 34135-698 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:

06/11/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: LABRECQUE, MICHEL
Address: 11701 DEAN STREET
City-St-Zip: BONITA SPRINGS, FL 34136

Title: VP () Delete
Name: POULIN, SERGE
Address: 3120 W. HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: LABRECQUE, MICHEL
Address: 12870 TRADE WAY FOUR #108
City-St-Zip: BONITA SPRINGS, FL 34135-698

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: MICHEL LABRECQUE

PST

06/11/2007

Electronic Signature of Signing Officer or Director

Date