

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000035609

FILED
Nov 07, 2007
Secretary of State**Entity Name:** W.C.C. MASTER CARPENTER USA, INC**Current Principal Place of Business:**12870 TRADE WAY FOUR
108
BONITA SPRINGS, FL 34135**New Principal Place of Business:****Current Mailing Address:**12870 TRADE WAY FOUR
108
BONITA SPING, FL 34135**New Mailing Address:****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
12870 TRADE WAY
108
BONITA SPRINGS, FL 34135 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**OFFICERS AND DIRECTORS:****Title:** PST () Delete
Name: LABRECQUE, MICHEL
Address: 12870 TRADE WAY FOUR #108
City-St-Zip: BONITA SPRINGS, FL 34135**Title:** VP (X) Delete
Name: POULIN, SERGE
Address: 3120 W. HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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: SERGE POULIN

VP

11/07/2007

Electronic Signature of Signing Officer or Director_____
Date