## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # V32126 1. Entity Name SHAYTEX U.S.A., INC.

**FILED** Jan 31, 2007 08:00 AM **Secretary of State** 

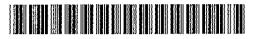


Principal Place of Business

Mailing Address

5365 NW 119TH TERRACE CORAL SPRINGS, FL 33076

5365 NW 119TH TERRACE CORAL SPRINGS, FL 33076



					01222007
O NOT	WRITE	IN	<b>THIS</b>	SPACE	

Applied For 4. FEI Number 65-0331077 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

FAGAN, ZACHARY 5365 NW 119TH TERRACE CORAL SPRINGS, FL 33076

SIGNATURE: 52/1

## DO NOT WRITE IN THIS SPACE

No Chg-P

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or re	gistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title	fapplicable (NOTE, Registered	d Agent signature	required when reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000611752 U2/U2/07-80075-017 150.00		
10.	OFFICERS AND DIREC	OTORS _	<u> </u>		<u> </u>		
NAME STREET ADDRESS CITY-ST-ZIP	PD FAGAN, ZACHARY 5365 NW 119TH TERRACE CORAL SPRINGS, FL 33076						
NAME STREET ADDRESS CITY-ST-ZIP	SD FAGAN, BETH 5365 NW 119TH TERRACE CORAL SPRINGS, FL 33076						
NAME STREET ADDRESS CITY-ST-ZIP	en e		DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
ITTLE NAME STREET ADDRESS GITY-ST-ZP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•		
12. I hereby of indicated of the corchanged	certily that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered, or on an attachment with an address, with al	ling does not qualify for the exe and accurate and that my signat d to execute this report as require to other like empowered.	emptions con ure shall hav red by Chapt	tained in Chapter 11 e the same legal effe er 607, Florida Statut	<ol> <li>Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if</li> </ol>		