

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004035

FILED  
Mar 30, 2012  
Secretary of State

Entity Name: EBENISTERIE BEAUBOIS LTEE

**Current Principal Place of Business:**

521 6TH AVENUE  
SAINT-GEORGES, QC G5Y 0H1 CA

**New Principal Place of Business:**

**Current Mailing Address:**

521 6TH AVENUE  
SAINT-GEORGES, QC G5Y 0H1 CA

**New Mailing Address:**

FEI Number: 98-0168053      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOCTOR, JAMES J  
215 NORTH EOLA DR  
ORLANDO, FL 32801 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: VP  
Name: POMERLEAU, FRANCIS  
Address: 30, CHEMIN DE L'ACCÈS À LA RITAGE,  
City-St-Zip: CHELSEA, QC J9B 1L9 CA

Title: S  
Name: LACOMBE, FRANCOIS  
Address: 974 RANG ST-CHARLES  
City-St-Zip: BEAUCEVILLE, QC G5X 1A9 CA

Title: P  
Name: POMERLEAU, PIERRE  
Address: 3262, CEDAR AVENUE  
City-St-Zip: WESTMONT, QC H3Y 1Z5 CA

Title: D  
Name: ARGUIN, DANIEL  
Address: 521 6E AVENUE  
City-St-Zip: SAINT GEORGES, QC G5Y 0H1 CA

I hereby 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 all other like empowered.

SIGNATURE: FRANCOIS LACOMBE

S

03/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date