

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004832

Entity Name: BARRETTEWOOD USA, INC.

FILED  
Apr 06, 2012  
Secretary of State

**Current Principal Place of Business:**

60 ABELE ROAD SUITE 1106  
BRIDGEVILLE, PA 15017

**New Principal Place of Business:**

**Current Mailing Address:**

740 N. MAIN STREET  
BULLS GAP, TN 37711

**New Mailing Address:**

FEI Number: 26-2849934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C  
Name: BARRETTE, YVES  
Address: 583 GRAND BERNIER NORD, ST JEAN SUR  
City-St-Zip: RICHELIEU QUEBEC CANADA, J3B 8K1

Title: D  
Name: BEDARD, MARC  
Address: 583 GRAND BERNIER NORD, ST JEAN SUR  
City-St-Zip: RICHELIEU QUEBEC CANADA, J3B 8K1

Title: P  
Name: BARRETTE, BENOIT  
Address: 583 GRAND BERNIER NORD, ST JEAN SUR  
City-St-Zip: RICHELIEU QUEBEC CANADA, J3B 8K1

Title: S  
Name: BLAIS, MARTIN  
Address: 583 GRAND BERNIER NORD, ST JEAN SUR  
City-St-Zip: RICHELIEU QUEBEC CANADA, J3B 8K1

Title: T  
Name: KOHAGEN, GARY  
Address: 740 NORTH MAIN STREET  
City-St-Zip: BULLS GAP, TN 37711

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: GARY KOHAGEN

T

04/06/2012

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

\_\_\_\_\_ Date