

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001519

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: HILTI CARIBE, INC.

**Current Principal Place of Business:**

5400 SOUTH 122ND EAST AVE.  
TULSA, OK 74146

**New Principal Place of Business:**

**Current Mailing Address:**

5400 SOUTH 122ND EAST AVE.  
TULSA, OK 74146

**New Mailing Address:**

FEI Number: 73-1354723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1203 GOVERNORS SQUARE BLVD.  
STE. 101  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BONHOMME, JEAN-MARC  
Address: 5400 SOUTH 122ND EAST AVE.  
City-St-Zip: TULSA, OK 74146

Title: VP ( ) Delete  
Name: BEAVER, KELLY  
Address: 5400 SOUTH 122ND EAST AVE.  
City-St-Zip: TULSA, OK 74146

Title: D ( ) Delete  
Name: EVERT, CARY  
Address: 5400 SOUTH 122ND EAST AVE.  
City-St-Zip: TULSA, OK 74146

Title: VP ( ) Delete  
Name: SIRES, DAVID  
Address: 5400 S. 122ND E AVE  
City-St-Zip: TULSA, OK 74146

Title: AS ( ) Delete  
Name: HUGHES, MARY  
Address: 5400 S 122ND E AVE  
City-St-Zip: TULSA, OK 74146

Title: VP (X) Delete  
Name: TINDLE, SCOTT  
Address: 5400 S 122ND E AVE  
City-St-Zip: TULSA, OK 74146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID SIRES

VP

04/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date