



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 116647		2. Name of Corporation MONDO USA, INC.			
3. Street Address Principal Business Office 1705 WEST NORTHWEST HIGHWAY, SUITE 255		City GRAPEVINE	State TX	Zip 76051-	
4. Business Phone No. 8174217861		5. State of Incorporation ILLINOIS			6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island THE SALE AND INSTALLATION OF TRACK FOR TRACK AND FIELD.					
8. NAMES AND ADDRESSES OF THE OFFICERS (X) BOX FOR ATTACHMENT <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Fernando Stroppiana			Vice President Name Maurizio & Frederico Stroppiana		
Street Address Via Garibaldi 12060 - Gallo			Street Address 2655 Rue Francis Hughes		
City D'Alba	State Italy	Zip	City Laval, Quebec	State Canada	Zip H7L 3S8
Secretary Name Tony Capobianco			Treasurer Name Scott MacRury		
Street Address 2655 Rue Francis Hughes			Street Address 2655 Rue Francis Hughes		
City Laval, Quebec	State Canada	Zip H7L 3S8	City Laval, Quebec	State Canada	Zip H7L 3S8
9. NAMES AND ADDRESSES OF THE DIRECTORS (X) BOX FOR ATTACHMENT <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Fernando Stroppiana			Director Name Maurizio & Frederico Stroppiana		
Street Address Via Garibaldi 12060 - Gallo			Street Address 2655 Rue Francis Hughes		
City D'Alba	State Italy	Zip	City Laval, Quebec	State Canada	Zip H7L 3S8
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (X) BOX FOR ATTACHMENT <input type="checkbox"/> 11. SHARES ISSUED (X) BOX FOR ATTACHMENT <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100,000 COMM NO PAR VALUE			10,000	Common	None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 1 6 6 4 7

\*116647 FBC 11/08/05 03:07:15 PM\*

FILED

Check No. APR 09 2007

By: By [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

TONY CAPOBIANCO

Print or Type Name of Officer  
SECRETARY

Form 630 12/01



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 116647		2. Name of Corporation MONDO USA, INC.			
3. Street Address Principal Business Office 1140 Hammond #B2190		City Grapevine Atlanta		State TX GA	Zip 76051 30328
4. Business Phone No. (800) 361-3747 (817) 421-7861		5. State of Incorporation ILLINOIS			6. SIC Code 8888
7. Brief Description of the Character of Business Conducted in Rhode Island THE SALE AND INSTALLATION OF TRACK FOR TRACK AND FIELD.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name /Director Fernando Stroppiana			Vice President Name / Directors Maurizio Stroppiana and Frederico Stroppiana		
Street Address Via Garibaldi 12060 - Gallo			Street Address 2655 Rue Francis Hughes		
City D'Alba	State ITALY	Zip	City Laval, Quebec	State CANADA	Zip H7L 3S8
Secretary Name Tony Capobianco			Treasurer Name Scott MacRury		
Street Address 2655 Rue Francis Hughes			Street Address 2655 Rue Francis Hughes		
City Laval, Quebec	State CANADA	Zip H7L 3S8	City Laval, Quebec	State CANADA	Zip H7L 3S8
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name SEE ABOVE (PRESIDENT AND VICE PRESIDENTS)			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES 100,000			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES 10,000 50,000		
Number of Shares	Class/Series	Common	Par Value	No	
100,000 COMM NO PAR VALUE					

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 6 6 4 7 \*

File Date 2-13-04  
Check No. 13992  
By: OC

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

02-05-04  
Date

TONY CAPOBIANCO  
Print or Type Name of Officer

SECRETARY  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

116647

2. Name of Corporation

MONDO USA, INC.

3. Street Address Principal Business Office

1140 Hammond #B2190

City

Atlanta

State

Georgia

Zip

30328

4. Business Phone No.

800-361-3747

5. State of Incorporation

ILLINOIS

6. SIC Code

8888

7. Brief Description of the Character of Business Conducted in Rhode Island

Sale of sports flooring

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name / Director

Fernando Stroppiana

Vice President Name / Directors

Maurizio Stroppiana and Frederico Stroppiana

Street Address

Via Garibaldi 12060 - Gallo

Street Address

2655 Rue Francis Hughes

City

D'Alba

State

ITALY

Zip

City

Laval Quebec

State

CANADA

Zip

H7L 3S8

Secretary Name

Tony Capobianco

Treasurer Name

Scott MacRury

Street Address

2655 Rue Francis Hughes

Street Address

2655 Rue Francis Hughes

City

Laval Quebec

State

CANADA

Zip

H7L 3S8

City

Laval Quebec

State

CANADA

Zip

H7L 3S8

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

SEE ABOVE (PRESIDENT AND VICE PRESIDENTS)

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES 100,000

Number of Shares

Class/Series Common

Par Value

No

100,000 COMM NO PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES 10,000

Number of Shares

Class/Series

Par Value

10,000

Common

No

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 6 6 4 7 \*

File Date:

3-17-03

Check No.:

1234

By:

2

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date February 25, 2003

TONY CAPOBIANCO

Print or Type Name of Officer

Title of Officer

SECRETARY



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **116647** 2. Name of Corporation **MONDO USA, INC.**  
3. Street Address Principal Business Office **1140 Hammond #B2190** City **Atlanta** State **Georgia** Zip **30328**  
4. Business Phone No. **800-361-3747** 5. State of Incorporation **ILLINOIS** 6. SIC Code **8888**  
7. Brief Description of the Character of Business Conducted in Rhode Island  
**Sale of sports flooring**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name /DIRECTOR			Vice President Name / DIRECTORS		
Fernando Stroppiana			Maurizio Stroppiana and Frederico Stroppiana		
Street Address			Street Address		
Via Garibaldi 12060 - Gallo			2655 Rue Francis Hughes		
City	State	Zip	City	State	Zip
D'Alba	ITALY		Laval Quebec	CANADA	H7L 3S8
Secretary Name			Treasurer Name		
Tony Capobianco			Scott MacRury		
Street Address			Street Address		
2655 Rue Francis Hughes			2655 Rue Francis Hughes		
City	State	Zip	City	State	Zip
Laval, Quebec	CANADA	H7L 3S8	Laval, Quebec	CANADA	H7L 3S8

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
SEE ABOVE (President and Vice Presidents)					
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

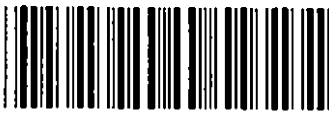
10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES **100,000**  
Number of Shares **100,000** Class/Series **Common** Par Value **No**  
**100,000 COMM NO PAR VALUE**

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES **10,000**  
Number of Shares **10,000** Class/Series **Common** Par Value **No**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 6 6 4 7 \*

File Date: 2-6-02  
Check No.: 116647  
By: ICMC  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date 01/30/02  
Print or Type Name of Officer Scott MacRury  
Title of Officer Treasurer  
5