

1.) CORPORATION NAME:

WPS USA Corp.

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1792581**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NV

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5630 TOMKEN RD UNIT 445
L4W 1P4

CITY/ST/ZIP: Mississauga, Ontario, Canada

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	DEREK J KILEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5630 TOMKEN ROAD, UNIT 4 & 5		
CITY/ST/ZIP/CO:	Mississauga, Ontario , L4W 1P4, CA		

NAME:	ALEXANDER VAN LEEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5630 TOMKEN ROAD, UNIT 4 & 5		
CITY/ST/ZIP/CO:	Mississauga, Ontario, L4W 1P4, CA		

NAME:	PAUL ANTHONY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	5630 Tomken Road, Unit 4 & 5		
CITY/ST/ZIP/CO:	Mississauga, Ontario, L4W 1P4, CA		

NAME:	MICHAEL L MARTELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	MORRISON COHEN LLP		
CITY/ST/ZIP/CO:	909 Third Avenue - 27th Floor New York, NY 10022		

NAME:	PETER PEDDERMORS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5630 TOMKEN ROAD, UNIT 4 & 5		
CITY/ST/ZIP/CO:	Mississauga, Ontario , L4W 1P4, CA		

NAME:	Licio Cengarle	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5630 Tomken Road, Unit 4 & 5		
CITY/ST/ZIP/CO:	Mississauga, Ontario , L4W 1P4, CA		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ MICHAEL L MARTELL</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>MICHAEL L MARTELL, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>5/22/2013</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.