

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003013

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: REGUS INTERNATIONAL SERVICES S.A.

## Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY  
SUITE 130  
SUNRISE, FL 33323

## New Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY  
SUITE 400  
SUNRISE, FL 33323

## Current Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY  
SUITE 130  
SUNRISE, FL 33323

## New Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY  
SUITE 400  
SUNRISE, FL 33323

FEI Number: 98-0399585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DE GREFF, CURTIS A  
1560 SAWGRASS CORPORATE PKWY  
SUITE 130  
FORT LAUDERDALE, FL 33323 US

## Name and Address of New Registered Agent:

DE GREFF, CURTIS A  
1560 SAWGRASS CORPORATE PKWY  
SUITE 400  
FORT LAUDERDALE, FL 33323 US

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:

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: DIXON, MARK LESLIE J  
Address: WHITE LADIES, PORTNALL DRIVE, VIRGINIA WAT  
City-St-Zip: SURREY GU25 2NR, ENGLAND,

Title: VSVC ( ) Delete  
Name: LOBO, RUDOLF JOHN G  
Address: HIGH TIMBERS, SHEERWATER AVENUE, WOODHAM  
City-St-Zip: SURREY KT15 3DS, ENGLAND,

Title: SRVP ( ) Delete  
Name: DE GREFF, CURTIS AMALVY  
Address: 7100 SW 114 TERRACE  
City-St-Zip: PINECREST, FL 33156

Title: D ( ) Delete  
Name: MOHR, EMILIO GASTON T  
Address: CALLE JUNCAL 1305, PISO 13. MONTEVIDEO  
City-St-Zip: URUGUAY,

Title: D ( ) Delete  
Name: LALANNE, DANIEL JOSE M  
Address: CALLE JUNCAL 1305, PISO 13. MONTEVIDEO  
City-St-Zip: URUGUAY,

## 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:

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: CURT DE GREFF

SRVP

01/22/2009

Electronic Signature of Signing Officer or Director

Date