2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023762

Title:

Name:

Address:

City-St-Zip:

FILED Apr 22, 2009 Secretary of State

| Entity Nar | ne: THE SNA | P ORGANISATION USA, INC. | | | | | |
|--|------------------------------------|---------------------------------|---|--|---|-------|--|
| Current Principal Place of Business: | | | New Prin | New Principal Place of Business: | | | |
| SUITE 350 | TH POINT DR. 2 ACH, FL 33139 | 1 | | | | | |
| Current Mailing Address: | | | New Mai | New Mailing Address: | | | |
| SUITE 350 | TH POINT DR. 2 ACH, FL 33139 | , | | | | | |
| FEI Number: | 65-0987248 | FEI Number Applied For () | FEI Number Not Ap | plicable () | Certificate of Status Desired (|) | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | | |
| WAUGH, 0 650 WEST SUITE 801 MIAMI BEA | | US | | | | | |
| | named entity s of Florida. | ubmits this statement for the p | ourpose of changing | its registered | d office or registered agent, or | both, | |
| SIGNATUF | RE: | | | | | | |
| | Electron | ic Signature of Registered Age | ent | | Date | | |
| Election Can | npaign Financing | Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIO | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | WAUGH, JAMES | DINT DR.,STE.3502 | Title: Name: Address: City-St-Zip: | | (X) Change () Addition MES H POINT DR.,STE.3502 CH, FL 33139 US | | |
| Title: Name: Address: City-St-Zip: | () | Delete | Title: Name: Address: City-St-Zip: | D THOMAS, IA 42 ELLESMI CHISWICK, | | | |
| Title: | () | Delete | Title: | D | () Change (X) Addition | | |

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.

Name:

Address:

City-St-Zip:

RATNA, NIMAL MR 15 TREBOROUGH

MILTON KEYNES, MK MK41LR UK

SIGNATURE: JAMES WAUGH **PSTD** 04/22/2009