

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050712

Entity Name: WIJA OF USA, INC.

FILED
Jun 22, 2009
Secretary of State

Current Principal Place of Business:

5220 S.W. 20TH AVE.
CAPE CORAL, FL 33914

New Principal Place of Business:

3620 COLONIAL BLVD SUITE 230
FORT MYERS, FL 33966

Current Mailing Address:

3620 COLONIAL BLVD SUITE 230
FORT MYERS, FL 33966

New Mailing Address:

FEI Number: 65-1090837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SSI ACCOUNTING & TAX SERVICE, INC.
3620 COLONIAL BLVD SUITE 230
FORT MYERS, FL 33966 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LANG, WILLI
Address: 5220 SW 20TH AVENUE
City-St-Zip: CAPE CORAL, FL 33914 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LANG, WILLI
Address: 3620 COLONIAL BLVD SUITE 230
City-St-Zip: FORT MYERS, FL 33966 FL

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: WILLI LANG

P

06/22/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date