

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003607

Entity Name: ROMIKA USA, INC.

FILED
Jul 26, 2004
Secretary of State

Current Principal Place of Business:

8730 NW 36 AVE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

8730 NW 36 AVE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 33-0703156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
103 NORTH MERIDIAN STREET, LOWER LEVEL
PO BOX 38413
TALLAHASSEE, FL 32301 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: D/C () Delete
Name: JAEGGI, RENE
Address: 8730 NW 36 AVE
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: GUICCIARDI, MARCO
Address: 8730 NW 36 AVE
City-St-Zip: MIAMI, FL 33147

Title: P () Delete
Name: DESHPANDE, DEEPAK
Address: 8730 NW 36TH AVE
City-St-Zip: MIAMI, FL 33147

Title: S/V (X) Delete
Name: JACKSON, ADAM
Address: 8730 NW 36TH AVE
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: ZELIK, FRIDMAN
Address: 8730 NW 36TH AVE
City-St-Zip: MIAMI, FL 33147

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 for the exemption stated in Section 119.07(3)(i), 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: DEEPAK DESHPANDE

P

07/26/2004

Electronic Signature of Signing Officer or Director

Date