

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073244

FILED  
May 30, 2008  
Secretary of State

Entity Name: MERIDIAN EXOTIC WOOD PRODUCTS, INC.

**Current Principal Place of Business:**

600 TAMPA BAY WAY  
SUITE 6  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

100 N TAMPA ST  
SUITE 1650  
TAMPA, FL 33602

**New Mailing Address:**

FEI Number: 65-0952104      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEREZ, LUIS A  
2030 DOUGLAS RD  
STE 119  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DE ZORZI, LEONARDO  
Address: 2030 DOUGLAS RD STE 119  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete  
Name: ADAMES, JOAO CARLOS  
Address: 2030 DOUGLAS RD STE 119  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: VANIN, THIAGO M  
Address: 2030 DOUGLAS RD STE 119  
City-St-Zip: CORAL GABLES, FL 33134

**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:

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: THIAGO M VANIN

D

05/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date