

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843024

FILED
Jul 15, 2009
Secretary of State

Entity Name: MEDITERRANEAN SHIPPING COMPANY (USA) INC.

Current Principal Place of Business:

420 FIFTH AVE.
NEW YORK, NY 10018 US

New Principal Place of Business:

Current Mailing Address:

420 FIFTH AVE.
NEW YORK, NY 10018 US

New Mailing Address:

FEI Number: 13-2696410 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: ARENA, NICOLA
Address: 420 FIFTH AVE. 26TH FL
City-St-Zip: NEW YORK, NY 10018 US

Title: P () Delete
Name: BOZZO, CLAUDIO
Address: 420 FIFTH AVE. 26TH FL
City-St-Zip: NEW YORK, NY 10018 US

Title: D () Delete
Name: FORMISANO, PASQUALE
Address: 40 AVE EUGENS PITTARD
City-St-Zip: GENEVA, SWITZERLAND CH1206, OC

Title: D () Delete
Name: BOURQUIN, ELVIO
Address: 40 AVE EUGENS PITTARD
City-St-Zip: GENEVA, SWITZERLAND CH1206, OC

Title: D () Delete
Name: MATTHEWS, LAWRENCE
Address: 40 AVE EUGENS PITTARD
City-St-Zip: GENEVA, SWITZERLAND CH1206, OC

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: ARENA NICOLA

CEO

07/15/2009

Electronic Signature of Signing Officer or Director

_____ Date