

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# F05000004479

Entity Name: TTS MARINE, INC.

**Current Principal Place of Business:**

6555 NORTH POWERLINE RD.  
SUITE 410  
FT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

6555 NORTH POWERLINE RD.  
SUITE 410  
FT LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 54-1105733      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

TAGUE, BRIAN P  
C/O TEW CARDENAS, LLP  
1441 BRICKELL AVENUE, 15TH FLOOR  
MIAMI, FL 33131 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

**OFFICERS AND DIRECTORS:**

Title: CD      ( ) Delete  
Name: EDBY, HAKAN  
Address: 6555 N POWERLINE RD STE 410  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MD      ( ) Delete  
Name: PAAS, TORSTEN  
Address: 6555 N POWERLINE RD STE 410  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: C      ( ) Delete  
Name: HAUGE, MARGRETHE  
Address: 6555 POWERLINE ROAD, SUITE 410  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CFO      (X) Change ( ) Addition  
Name: EDBY, HAKAN  
Address: 6555 N POWERLINE RD STE 410  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: CEO      (X) Change ( ) Addition  
Name: PAAS, TORSTEN  
Address: 6555 N POWERLINE RD STE 410  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P      ( ) Change (X) Addition  
Name: MASTROCOLA, RENO  
Address: 6555 POWERLINE ROAD, SUITE 410  
City-St-Zip: FT. LAUDERDALE, FL 33309

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: TORSTEN PAAS

CEO

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date