

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000625

Entity Name: CALYON "CORPORATION"

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

9 QUAI DU PRESIDENT PAUL DOUMER
PARIS LA DEFENSE
CEDEX 92920 FRANCE, XX

New Principal Place of Business:

9 QUAI DU PRESIDENT PAUL DOUMER
PARIS LA DEFENSE CEDEX
CEDEX 92920 FRANCE, OC 92920 XX

Current Mailing Address:

601 BRICKELL KEY DR.
SUITE 800
MIAMI, FL 33131

New Mailing Address:

FEI Number: 36-2813095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD STE 1400 (WGM)
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARLSON, RICHARD V
Address: 1301 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10019

Title: CEO () Delete
Name: VALROFF, PATRICK
Address: 9 QUAI DU PRESIDENT PAUL DOUMER
City-St-Zip: CEDEX 92920 FRANCE, OC

Title: DCEO () Delete
Name: MASSIERA, ALAIN
Address: 9 QUAI DU PRESIDENT PAUL DOUMER
City-St-Zip: CEDEX 92920 FRANCE, OC

Title: DCEO () Delete
Name: GRIVET, JEROME
Address: 9 QUAI DU PRESIDENT PAUL DOUMER
City-St-Zip: CEDEX 92920 FRANCE, OC

Title: CEO () Delete
Name: GOLLAIRE-MORILLON, DUNCAN
Address: 1301 AVENUE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10019

Title: C () Delete
Name: PAUGET, GEORGES
Address: BD PASTE UR - CREDITAGRIGOLE SA
City-St-Zip: PARIS 75015 FRANCE, XX

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:

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: MATHIEU FERRAGUT

GM

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date