2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# F07000001525

Entity Name: MEIKO USA, INC.

Current Principal Place of Business:

917 AIRPARK CENTER DRIVE
NASHVILLE, TN 37217

New Principal Place of Business:

1349 HEIL QUAKER BLVD.
LAVERGNE, TN 37086

Current Mailing Address:

917 AIRPARK CENTER DRIVE
NASHVILLE, TN 37217

New Mailing Address:

1349 HEIL QUAKER BLVD.
LAVERGNE, TN 37086

FEI Number: 37-1440827 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T 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: C ( ) Delete
Name: SCHERINGER, STEFAN
Address: ENGLESTRASSE 3, D77652
City-St-Zip: OFFENBURG GERMANY,

Title: P ( ) Delete
Name: SCHENK, MARTIN
Address: 917 AIRPARK CENTER DRIVE
City-St-Zip: NASHVILLE, TN 37217

Title: S ( ) Delete
Name: WILSON, CHARLES D III
Address: 917 AIRPARK CENTER DRIVE
City-St-Zip: NASHVILLE, TN 37217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: SCHENK, MARTIN
Address: 1349 HEIL QUAKER BLVD.
City-St-Zip: LAVERGNE, TN 37086

Title: S (X) Change ( ) Addition
Name: WILSON, CHARLES D III
Address: 1349 HEIL QUAKER BLVD.
City-St-Zip: LAVERGNE, TN 37086

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: CHARLES D WILSON III CFO 04/27/2009

Electronic Signature of Signing Officer or Director — Date