2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# F07000003780

Entity Name: OCEAN MEDICAL INTERNATIONAL USA INCORPORATED

Current Principal Place of Business:

2019 SW 20 ST
SUITE 210
FT LAUDERDALE, FL 33315 US

New Principal Place of Business:

Current Mailing Address:

2019 SW 20 ST
SUITE 210
FT LAUDERDALE, FL 33315 US

New Mailing Address:

FEI Number: 98-0540342 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUBIN, CHARLES D ESQ
2101 CORPORATE BLVD SUITE 107
BOCA RATON, FL 33431 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: CDVT ( ) Delete
Name: MARSHALL, IAN B
Address: 1310/38 BRIDGE STREET
City-St-Zip: SYDNEY NSW 2000 AUSTRALIA, XX

Title: VCDP ( ) Delete
Name: IRONS, DAVID J
Address: CALLE ALVARO DE BAZAN 7/3, 07014
City-St-Zip: PALMA DE MALLORCA BACEARES, XX

Title: S ( ) Delete
Name: IRONS, DAVID J
Address: CALLE ALVARO DE BAZAN 7/3, 07014
City-St-Zip: PALMA DE MALLORCA BACEARES, 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:

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: IAN B MARSHALL CDVT 03/19/2009

Electronic Signature of Signing Officer or Director Date