

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005652

FILED  
Feb 21, 2009  
Secretary of State

Entity Name: BOTANY BAY HOLDING S.A., CORP.

## Current Principal Place of Business:

1075 DUVAL STREET, SUITE C-11  
KEY WEST, FL 33040

## New Principal Place of Business:

## Current Mailing Address:

506 LOUISA STREET  
KEY WEST, FL 33040

## New Mailing Address:

FEI Number: 98-0556537

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARRELLY, GREGORY G  
C/O CATALFOMO & FARRELLY  
506 LOUISA STREET  
KEY WEST, FL 33040 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: P ( ) Delete  
Name: MOOSLEITHNER-BATLINE, ANGELIKA  
Address: AEULESTRASSE 74, PO BOX 461  
City-St-Zip: FL-9490 VADUZ,

Title: S ( ) Delete  
Name: HAYES, PAUL  
Address: 1075 DUVAL STREET, SUITE C-11  
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete  
Name: VERWALTUNGSANSTALT, DORBAT  
Address: AEULESTRASSE 74, PO BOX 461  
City-St-Zip: FL- 9490 VADUZ, FL 33040

## 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: PAUL HAYES

S

02/21/2009

Electronic Signature of Signing Officer or Director

Date