## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000006308

Entity Name: RAVAGO HOLDINGS AMERICA, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
800 CONNECTICUT AVENUE NORWALK, CT 068541631				
Current Mailing Address:			New Mailir	ng Address:
800 CONNECTICUT AVENUE NORWALK, CT 068541631				
FEI Number:	20-5345851	FEI Number Applied For ( ) FEI Num	mber Not Appli	icable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US				
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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PCEO ()E ROUSSIS, THEO MOERENSTRAA' ARENDONK, BEI	Г 89	Title: Name: Address: City-St-Zip:	CEO (X) Change ( ) Addition DERHAGOPIAN, DAVID 1900 SUMMIT TOWER BLVD. #900 ORLANDO, FL 32810
Title: Name: Address: City-St-Zip:	D ()EROUSSIS, THEO MOERENSTRAA'ARENDONK, BEI	Г 89	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition LUX, MARK D 800 CONNECTICUT AVE NORWALK, CT 06856
Title: Name: Address: City-St-Zip:	VD () E LUX, MARK D 800 CONNECTIO NORWALK, CT (		Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition MULLIN, DAMIAN M 800 CONNECTICUT AVENUE NORWALK, CT 068541631
Title: Name: Address: City-St-Zip:	DERHASOPIAN,	OWER BLVD. #900	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition PROVOST, JOHN 800 CONNECTICUT AVE NORWALK, CT 06856
Title: Name: Address: City-St-Zip:	TD () E RESTIVO, RONA 800 CONNECTIO NORWALK, CT (	UT AVENUE	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition NARDOZZI, R J 800 CONNECTICUT AVENUE NORWALK, CT 06856
Title: Name: Address: City-St-Zip:	T (X) I MULLIN, DAMIAN 800 CONNECTIO NORWALK, CT (	UT AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition

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: PROVOST, JOHN S 03/16/2009