## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F08000004312

Entity Name: HURTIGRUTEN INC.

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 405 PARK AVENUE SUITE 904 NEW YORK, NY 10022 **New Mailing Address: Current Mailing Address:** 405 PARK AVENUE SUITE 904 NEW YORK, NY 10022 FEI Number: 13-0460204 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOPKINS, CY % HURTIGRUTEN INC 5100 NW 33RD AVE, SUITE 256 FT LAUDERDALE, FL 33309 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROOD, HANS Name: Name: 405 PARK AVE Address: Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: ( ) Delete Title: VCVP Title: (X) Change ( ) Addition Name: TILLMAN, MONIKA Name: TILLMAN, MONIKA 405 PARK AVE Address: 405 PARK AVE Address: NEW YORK, NY 10022 NEW YORK, NY 10022 City-St-Zip: 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: MONIKA TILLMAN VP 04/28/2009