2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004324

SAGI, PETE

7411 GARDENSIDE DR.

DAYTON, OH 45414

Name: Address:

City-St-Zip:

Entity Name: COSTRECOVERY USA, INC.

FILED Jul 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6450 POE AVE., SUITE 401 DAYTON, OH 45414 **Current Mailing Address: New Mailing Address:** 6450 POE AVE., SUITE 401 DAYTON, OH 45414 FEI Number: 20-0109524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAMPBELL, DONALD RAMBA, DAVID C 6218 SADDLEHORN AVE. 2600 CÉNTENNIAL PLACE SARASOTA, FL 34243 SUITE 100 TALLAHASSEE, FL 32308-957 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: DAVID RAMBA 07/07/2009 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HENLEY, TERRY Name: Name: 278 N. CHILDRENS HOME RD. Address: Address: City-St-Zip: TROY, OH 45373 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HENLEY, JENNIFER Name: 278 N. CHILDRENS HOME RD. Address: Address: TROY, OH 45373 City-St-Zip: City-St-Zip: Title: Title: PVC () Delete () Change () Addition MOORE, REGINA Name: Name: 2345 LIBERTY RD Address: Address: City-St-Zip: NEW CARLISLE, OH 45344 City-St-Zip: Title: () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: TERRY HENLEY CEO 07/07/2009