

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F84418

Entity Name: PASSINA PRODUCTS USA, INC.

FILED
Feb 16, 2004
Secretary of State

Current Principal Place of Business:

4919 MEMORIAL HWY
SUITE 142
TAMPA, FL 33634 US

Current Mailing Address:

P.O. BOX 20306
TAMPA, FL 33622 US

New Principal Place of Business:

2111 W. SWANN AVENUE
SUITE 203
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-2202168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUWELING, MILAN A
4919 MEMORIAL HIGHWAY
SUITE 142
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

HOUWELING, MILAN A
2111 W. SWANN AVENUE
SUITE 203
TAMPA, FL 33606 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: _____

02/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARTH, R. ALEXANDER
Address: H.WEIERWEG 6
City-St-Zip: ROTHRIST, SW

Title: DP () Delete
Name: HOUWELING, AART,
Address: 4919 MEMORIAL HIGHWAY, SUITE 142
City-St-Zip: TAMPA, FL 33634

Title: DST () Delete
Name: HOUWELING, MILAN A
Address: 4919 MEMORIAL HIGHWAY, SUITE 142
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: HOUWELING, AART,
Address: 2111 W. SWANN AVENUE, SUITE 203
City-St-Zip: TAMPA, FL 33606

Title: DST (X) Change () Addition
Name: HOUWELING, MILAN A
Address: 2111 W. SWANN AVENUE, SUITE 203
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MILAN A. HOUWELING

DP

02/16/2004

Electronic Signature of Signing Officer or Director

Date