2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# F99000000825

Entity Name: GLOBECAST AMERICA INCORPORATED

Current Principal Place of Business:

13801 NW 14TH STREET
SUNRISE, FL 33323

New Principal Place of Business:

225 LIBERTY ST., SUITE 4301
225 LIBERTY ST., SUITE 4301
NEW YORK, NY 10281

Current Mailing Address:

13801 NW 14TH STREET
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 87-0507189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD ( ) Delete
Name: FROST, MARY
Address: 13801 NW 14TH STREET
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete
Name: PINON, CHRISTIAN
Address: 5 ALLEE GUSTAVE EFFEL
City-St-Zip: ISSY LES MOULINEAX CORDEX, 92136

Title: D ( ) Delete
Name: SANCHEZ, DARBY
Address: 5 ALLEE GUSTAVE EFFEL
City-St-Zip: ISSY LES MOULINEAX CORDEX, CA 92136

Title: D (X) Delete
Name: LEOST, MARTHE
Address: 5 ALLEE GUSTAVE EFFEL
City-St-Zip: ISSY LES MOULINEAX CORDEX, CA 92136

Title: D (X) Delete
Name: HUET, MICHEL
Address: 225 LIBERTY ST SUITE 4301
City-St-Zip: NEW YORK, NY 10281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PINON, CHRISTIAN PRESIDE
Address: 225 LIBERTY ST., SUITE 4301
City-St-Zip: NEW YORK, NY 10281

Title: D (X) Change ( ) Addition
Name: LEOST, MARTHE DIRECTO
Address: 225 LIBERTY ST., SUITE 4301
City-St-Zip: NEW YORK, NY 10281

Title: D (X) Change ( ) Addition
Name: SANCHEZ, DARBY DIRECTO
Address: 225 LIBERTY ST., SUITE 4301
City-St-Zip: NEW YORK, NY 10281

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: CHRISTIAN PINON PRES 04/15/2009

Electronic Signature of Signing Officer or Director — Date