

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L45776

Entity Name: EWO INVESTMENTS U.S., INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

C/O GILLESPIE AND ALLISON, P.A.
1515 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON, FL 33432

Current Mailing Address:

C/O GILLESPIE AND ALLISON, P.A.
1515 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

C/O GILLESPIE AND ALLISON, P.A.
7601A NORTH FEDERAL HIGHWAY, SUITE 165
BOCA RATON, FL 33487

New Mailing Address:

C/O GILLESPIE AND ALLISON, P.A.
7601A NORTH FEDERAL HIGHWAY, SUITE 165
BOCA RATON, FL 33487

FEI Number: 59-2032148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLESPIE, R BOWEN
1515 S FEDERAL HWY STE 300
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

GILLESPIE, R BOWEN
7601A NORTH FEDERAL HIGHWAY, SUITE 165
BOCA RATON, FL 33487 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: R. BOWEN GILLESPIE

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAIER, HANS-PETER
Address: 99 KLENZESTRASSE
City-St-Zip: MUNICH, GERMANY, B0469

Title: VPD () Delete
Name: JAIS, WOLFGANG
Address: 99 KLENZESTRASSE
City-St-Zip: MUNICH, WEST GERMANY,

Title: VP () Delete
Name: GILLESPIE, R BOWEN
Address: 1515 S FEDERAL HWY #300
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: GILLESPIE, R BOWEN
Address: 7601A NORTH FEDERAL HIGHWAY, SUITE 165
City-St-Zip: BOCA RATON, FL 33487

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: R. BOWEN GILLESPIE

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date