

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001768

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** NORDIC RELIEF ALLIANCE, INC.

**Current Principal Place of Business:**

8068 NW 29 STREET  
MIAMI, FL 33122 US

**New Principal Place of Business:**

8068 NW 29 STREET  
DORAL, FL 33122 US

**Current Mailing Address:**

8068 NW 29 STREET  
MIAMI, FL 33122 US

**New Mailing Address:**

8068 NW 29 STREET  
DORAL, FL 33122 US

**FEI Number:** 03-0399724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRICK, WILLIAM W JR  
1216 E ATLANTIC BLVD, STE 7  
POMPANO BEACH, FL 33060 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GULDSTRAND, INGVAR SR  
Address: 8068 NW 29 ST  
City-St-Zip: DORAL, FL 33122 US

Title: D  
Name: LILJA, JOHAN SR  
Address: 8068 NW 29 ST  
City-St-Zip: DORAL, FL 33122 US

Title: D  
Name: GONZALEZ, RAFAEL SR  
Address: 10361 SW 20 TERR  
City-St-Zip: MIAMI, FL 33165 US

Title: D  
Name: BACKNAS, JOHN SR  
Address: 8068 NW 29 ST  
City-St-Zip: DORAL, FL 33122 US

Title: D  
Name: MILTON, JOSEPH SR  
Address: 8068 NW 29 ST  
City-St-Zip: DORAL, FL 33122 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAFAEL GONZALEZ

D

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date