

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001434

Entity Name: TECHNOMARINE USA, INC.

FILED  
Jan 27, 2009  
Secretary of State

## Current Principal Place of Business:

2915 BISCAYNE BLVD.  
SUITE 303  
MIAMI, FL 33137

## New Principal Place of Business:

7600 NW 19TH STREET  
SUITE 401  
MIAMI, FL 33126

## Current Mailing Address:

2915 BISCAYNE BLVD.  
SUITE 303  
MIAMI, FL 33137

## New Mailing Address:

7600 NW 19TH STREET  
SUITE 401  
MIAMI, FL 33126

FEI Number: 91-1997007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT 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: D ( ) Delete  
Name: PFISTER, GREGORY  
Address: 2915 BISCAYNE BLVD., STE 303  
City-St-Zip: MIAMI, FL 33137

Title: DCEO ( ) Delete  
Name: OHAYON, GILBERT  
Address: 2915 BISCAYNE BLVD., STE 303  
City-St-Zip: MIAMI, FL 33137

Title: C ( ) Delete  
Name: OHAYON, GILBERT  
Address: 2915 BISCAYNE BLVD., STE 303  
City-St-Zip: MIAMI, FL 33137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change ( ) Addition  
Name: ESPINASSE, AGNES S  
Address: 7600 NW 19TH STREET., STE 401  
City-St-Zip: MIAMI, FL 33126

Title: CEO (X) Change ( ) Addition  
Name: SANDRES, GALIA  
Address: 7600 NW 19TH STREET., STE 401  
City-St-Zip: MIAMI, FL 33126

Title: C (X) Change ( ) Addition  
Name: OHAYON, GILBERT  
Address: 7600 NW 19TH STREET., STE 401  
City-St-Zip: MIAMI, FL 33126

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: GALIA SANDRES

CEO

01/27/2009

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

\_\_\_\_\_  
Date