

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032466

Entity Name: FALC USA, INC.

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

15895 NW 15 AVE
MIAMI, FL 33169

New Principal Place of Business:

5881 NW 151ST STREET
SUITE 203
MIAMI LAKES, FL 330142442 US

Current Mailing Address:

15895 NW 15 AVE
MIAMI, FL 33169

New Mailing Address:

5881 NW 151ST STREET
SUITE 203
MIAMI LAKES, FL 330142442 US

FEI Number: 65-1100453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVENUE 2ND FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

EKONOMIDES, NICKOLAS C PA
791 BAYWAY BLVD
CLEARWATER, FL 33767 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: NICKOLAS C EKONOMIDES, PA

01/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORFEI, MARCO
Address: CDA SAN DOMENICO 24
City-St-Zip: CIVITANOVA MARCHE, MC 62013 IT

Title: S () Delete
Name: RANSON, JOANN
Address: 1457 HWY 304 BOX 6848
City-St-Zip: YARMOUTH, NS B5A 4A7 CA

Title: D () Delete
Name: FERRETTI, SALINA
Address: CDA SAN DOMENICO 24
City-St-Zip: CIVITANOVA MARCHE, MC 62013 IT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOANN RANSON

S

01/11/2008

Electronic Signature of Signing Officer or Director

Date