

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 23, 2008 08:00
Secretary of State**

DOCUMENT # P01000048438

1. Entity Name
COEMAR USA, INC.



Principal Place of Business

**10242 N.W. 47TH ST.
SUITE 16
SUNRISE, FL 33351**

Mailing Address

**2 SOUTH BISCAYNE BOULEVARD
SUITE 3400
MIAMI, FL 33131**



02012008 No Chg-P CR2ED34 (11/05)

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4. FBI Number
54-2038235

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GY CORPORATE SERVICES, INC.
ONE BISCAYNE TOWER, SUITE 3400
2 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131-1897**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	WILKINSON, ERIC
STREET ADDRESS	37 IXWORTH PLACE
CITY- ST- ZIP	LONDON, EN SW3 3QH
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

ERIC WILKINSON

9/4/08 00 447734103935