2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000107891

Address:

City-St-Zip:

FILED Oct 26, 2006 Secretary of State

Entity Name: EAST WEST TECHNOLOGIES (USA) INC. **Current Principal Place of Business: New Principal Place of Business:** P. O. BOX 267428 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** P. O. BOX 267428 WESTON, FL 33326 FEI Number: 02-0554013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHOTHODY, SETHUMDAHVAN P. O. BOX 267428 WESTON, FL 33326 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CHOTHODY, SETHUMDHAVAN CHOTHODY, SETHUMDHAVAN Name: Name: P. O. BOX 267428 P. O. BOX 267428 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326 Title: Title: () Delete () Change () Addition Name: HAWALDAR, HALIMA Name: P. O. BOX 267428 Address: Address: WESTON, FL 33326 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition MOORJANI, HARESH Name: Name: P O BOX 267428 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: () Delete Title: () Change () Addition HYDARALI, FAHDAL H Name: Name: Address: P.O.BOX 267428 Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: Title: () Delete () Change (X) Addition ALEJANDRO, ELIEZER Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

4 ST.H13 CUPEY GARDENS

SANJUAN ,PUERTO RICO, PR 00926

SIGNATURE: CHOTHODY SETHUMADHAVAN D 10/26/2006