

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107891

FILED
Apr 29, 2008
Secretary of State

Entity Name: EAST WEST TECHNOLOGIES (USA) INC.

Current Principal Place of Business:

P. O. BOX 8157
FORT LAUDERDALE, FL 33310

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 8157
FORT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 02-0554013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHOTHODY, SETHUMDAHVAN
P. O. BOX 8157
FORT LAUDERDALE, FL 33310 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: VP () Delete
Name: CHOTHODY, SETHUMDAHVAN
Address: P. O. BOX 8157
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: D () Delete
Name: HAWALDAR, HALIMA
Address: P. O. BOX 8157
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: D () Delete
Name: HYDARALI, FAHDAL H
Address: P.O.BOX 8157
City-St-Zip: FORT LAUDERDALE, FL 33310

Title: P (X) Delete
Name: ALEJANDRO, ELIEZER
Address: 4 ST.H13 CUPEY GARDENS
City-St-Zip: SANJUAN ,PUERTO RICO, PR 00926

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:

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: CHOTHODY SETHUMADHAVAN

DIR

04/29/2008

Electronic Signature of Signing Officer or Director

Date