

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107891

FILED  
Apr 23, 2009  
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:

P. O. BOX 550308  
FORT LAUDERDALE, FL 33355

## Current Mailing Address:

P. O. BOX 8157  
FORT LAUDERDALE, FL 33310

## New Mailing Address:

P. O. BOX 550308  
FORT LAUDERDALE, FL 33355

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:

CHOTHODY, SETHUMDAHVAN  
P. O. BOX 550308  
FORT LAUDERDALE, FL 33355 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:

04/23/2009

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: CHOTHODY, SETHUMDAHVAN  
Address: P. O. BOX 550308  
City-St-Zip: FORT LAUDERDALE, FL 33355

Title: D (X) Change ( ) Addition  
Name: HAWALDAR, HALIMA  
Address: P. O. BOX 550308  
City-St-Zip: FORT LAUDERDALE, FL 33355

Title: D (X) Change ( ) Addition  
Name: HYDARALI, FAHDAL H  
Address: P.O.BOX 550308  
City-St-Zip: FORT LAUDERDALE, FL 33355

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

VP

04/23/2009

Electronic Signature of Signing Officer or Director

Date