

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011298

Entity Name: CASSAR FILMWORKS USA INC.

FILED  
Jul 16, 2009  
Secretary of State

## Current Principal Place of Business:

22845 CALVERT ST  
WOODLAND HILLS, CA 91367

## New Principal Place of Business:

## Current Mailing Address:

C/O MOSS ADAMS LLP  
11766 WILSHIRE BLVD 9TH FLOOR  
LOS ANGELES, CA 90025

## New Mailing Address:

FEI Number: 20-0617524      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CASSAR, JON  
Address: 22845 CALVERT ST  
City-St-Zip: WOODLAND HILLS, CA 91367

Title: ST ( ) Delete  
Name: CASSAR, KRISTINA  
Address: 22845 CALVERT ST  
City-St-Zip: WOODLAND HILLS, CA 91367

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: THOMAS M. GARCIA

CPA

07/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date