

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040557

Entity Name: BARU USA, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

325 S BISCAYNE BLVD
SUITE 1221
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

325 S BISCAYNE BLVD
SUITE 1221
MIAMI, FL 33131

New Mailing Address:

FEI Number: 04-3646842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA'S ENTERPRISE, INC.
5220 S UNIVERSITY DR
SUITE C-102
DAVIE, FL 33328 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: PTD () Delete
Name: BOTERO, LEONARDO
Address: 325 S BISCAYNE BLVD SUITE 1221
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: SIERRA, LUZ HELENA
Address: 325 S BISCAYNE BLVD SUITE 1221
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: POSADA, JULIANA
Address: 325 S BISCAYNE BLVD SUITE 1221
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: BOTERO, JUAN C
Address: 325 S BISCAYNE BLVD SUITE 1221
City-St-Zip: MIAMI, FL 33131

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: LEONARDO BOTERO

PTD

03/06/2009

Electronic Signature of Signing Officer or Director

Date