

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047355

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: HANNSI USA IMPORTS/EXPORTS INC.

**Current Principal Place of Business:**

3014 NE 49TH ST  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

3014 NE 49TH ST  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 02-0619281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAPPAS, PETER C  
225 E. ROBINSON ST., SUITE 540  
ORLANDO, FL 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: DP ( ) Delete  
Name: GISPERT, MANUEL  
Address: 3014 NE 49TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete  
Name: GISPERT, GERDA  
Address: 3014 NE 49TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33308

**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: MANUEL GISPERT

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date