2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000100771

Entity Name: NASOA COTTON USA, INC.

FILED Apr 29, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

401 BISCAYNE BLVD. S-101 1717 NORTH BAYSHORE DRIVE. MIAMI, FL 33132

SUITE 108

MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

401 BISCAYNE BLVD S-101 1717 NORTH BAYSHORE DRIVE. MIAMI, FL 33132

SUITE 108

MIAMI, FL 33132

FEI Number: 81-0632325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRETONECHE, JULIO BRETONECHE, JULIO 401 BISCAYNE BLVD S-101 1717 NORTH BAYSHORE DR APT. 1536 MIAMI, FL 33132 US

MIAMI, FL 33132 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: 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BRETONECHE, JULIO C BRETONECHE, JULIO C Name: Name: 401 BISCAYNE BLVD S-101 1717 NORTH BAYSHORE DRIVE #1536 Address: Address:

City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132

DS Title: DS Title: (X) Change () Addition () Delete BRETONECHE, SOLVEIG E. N BRETONECHE, SOLVEIG E. N Name: Name: 401 BISCAYNE BLVD S-101 1717 NORTH BAYSHORE DRIVE #1536 Address: Address:

MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132 City-St-Zip:

Title: Title: () Delete (X) Change () Addition BRETONECHE, ADELINE M Name: BRETONECHE, ADELINE M Name:

401 BISCAYNE BLVD S-101 1717 NORTH BAYSHORE DRIVE #1536 Address: Address:

City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132

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: JULIO BRETONECHE DR. 04/29/2009