

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000158297

Entity Name: SCHILLER AMERICA, INC.

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

2131 NW 79 AVE
DORAL, FL 33122

New Principal Place of Business:

Current Mailing Address:

2131 NW 79 AVE
DORAL, FL 33122

New Mailing Address:

FEI Number: 33-0328918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUFF, DAVID
1407 E. ROBINSON STREET
ORLANDO, FL 32801 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: P () Delete
Name: PUERTO, JAIME E
Address: 4630 NORTH UNIVERSITY DR SUITE 430
City-St-Zip: CORAL SPRINGS, FL 33076

Title: ST () Delete
Name: POTTS, ALINA F
Address: 4630 NORTH UNIVERSITY DRIVE SUITE 430
City-St-Zip: CORAL SPRINGS, FL 33076

Title: V (X) Delete
Name: DEDYO, CHRIS
Address: 4630 NORTH UNIVERSITY DR # 430
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHERER, KURT
Address: 2131 N. W. 79 AVENUE
City-St-Zip: DORAL, FL 33122

Title: ST (X) Change () Addition
Name: POTTS, ALINA F
Address: 2131 N. W. 79 AVENUE
City-St-Zip: DORAL, FL 33122

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: ALINA F. POTTS

ST

03/17/2009

Electronic Signature of Signing Officer or Director

Date