2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

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Entity Name: NOSTROMO NORTH AMERICA INC.

Current Principal Place of Business:

NOSTROMO NORTH AMRICA INC.
C/O GRUPO CALVO, PECHUAN, 1-1
MADRID, SPAIN, SP 28002 SP

New Principal Place of Business:

Current Mailing Address:

NOSTROMO NORTH AMERICA, INC
C/O GRUPO CALVO, PECHUAN, 1-1
MADRID SPAIN, 28002 US

New Mailing Address:

NOSTROMO NORTH AMRICA INC.
C/O GRUPO CALVO, PECHUAN, 1-1
MADRID, SPAIN, SP 28002 SP

FEI Number: 90-0152324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CALVO PUMPIDO, MANUEL
Address: PECHUAN 1 - 10
City-St-Zip: MADRID, SPAIN, SP 28002 SP

Title: DC ( ) Delete
Name: CALVO GARCIA-BENA, MANUEL
Address: PECHUAN 1 - 10
City-St-Zip: MADRID, SPAIN, SP 28002 SP

Title: DVP ( ) Delete
Name: PENALVA ARIGITA, MIGUEL A
Address: PECHUAN 1 - 10
City-St-Zip: MADRID, SPAIN, SP 28002 SP

Title: DT ( ) Delete
Name: LLANAS CARVAJAL, DAVID
Address: PECHUAN 1 - 10
City-St-Zip: MADRID, SPAIN, SP 28002 SP

Title: DS ( ) Delete
Name: CASAS ROBLA, JESUS
Address: PECHUAN 1 - 10
City-St-Zip: MADRID, SPAIN, SP 28002 SP

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:

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: DAVID LLANAS CARVAJAL DT 03/25/2009
Electronic Signature of Signing Officer or Director Date