

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000055388

Entity Name: MOTOFINO USA, INC.

**FILED**  
**Jan 14, 2008**  
**Secretary of State****Current Principal Place of Business:**1220 US HWY 1  
F  
NORTH PALM BEACH, FL 33408**New Principal Place of Business:****Current Mailing Address:**1220 US HWY 1  
F  
NORTH PALM BEACH, FL 33408**New Mailing Address:**

FEI Number: 34-1989831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**VAN RIJN, TOM CEO  
1220 US HWY 1  
F  
NORTH PALM BEACH, FL 33408 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

**OFFICERS AND DIRECTORS:**Title: CEO ( ) Delete  
Name: VAN RIJN, TOM CEO  
Address: 1220 US HWY 1 STE #F  
City-St-Zip: NORTH PALM BEACH, FL 33408Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: PRES ( ) Change (X) Addition  
Name: SIMPSON, TOM PRES  
Address: 2167 GORDON HIGHWAY  
City-St-Zip: AUGUSTA, GA 30909

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: TOM SIMPSON

PRES

01/14/2008

Electronic Signature of Signing Officer or Director

Date