2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041851

Entity Name: SAY HELLO USA.COM INC.

FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5900 SHIRLEY STREET UNIT#7 NAPLES, FL 34109 **Current Mailing Address: New Mailing Address:** P. O. 4371 HAINES CITY, FL 33845 FEI Number: 75-3263337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUNCAN, GEORGE 202 DURÁNGO WAY KISSIMMEE, FL 34758 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition PRYCE, JAMES R MATHEW, QUITTO C Name: Name: 3138 SOUTH UNIVERSITY DRIVE 5900 SHIRLEY STREET, UNIT #7 Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: NAPLES, FL 34109 AVP Title: Title: () Delete (X) Change () Addition SAY HELLO USA.COM (S, T. LUCIA LTD.) Name: Name: HELLO USA -D.J. EMMA, NUEL & ASSOCIA T ES LTD. P. O. BOX 1302 P. O. BOX 1302 Address: Address: CASTRIES, ST. LUCIA, WI CASTRIES, ST. LUCIA, WI City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: SEC SEC PETERS, SHERAN DONALD, CURTIS Name: Name: 1775 NW 175TH STREET 1890 OAKES BLVD. Address: Address: City-St-Zip: MIAMI GARDENS, FL 33056 City-St-Zip: NAPELES, FL 34119 Title: () Delete Title: () Change () Addition DUNCAN, GEORGE Name: Name: Address: P. O. BOX 4371 Address: City-St-Zip: HAINES CITY, FL 33845 City-St-Zip: Title: CEO Title: () Delete () Change () Addition EMMANUEL, JOSEPH D Name: Name: CORINTH ESTATE P.O.B. 1302 Address: Address: City-St-Zip: CASTRIES, ST. LUCIA, WI City-St-Zip: Title: () Delete Title: () Change () Addition Name: EMMANUEL RAMLAL, MARION H Name: UNION, P. O. BOX 1302 Address: Address: City-St-Zip: City-St-Zip: CASTRIES, ST. LUCIA, WI

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: JOSEPH EMMANUEL CEO 01/15/2009