

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000066267

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: STARR INTERNATIONAL USA, INC.

## Current Principal Place of Business:

35 OCEAN REEF DRIVE  
KEY LARGO, FL 33037

## New Principal Place of Business:

PMB 175, 24 DOCKSIDE LANE  
KEY LARGO, FL 33037

## Current Mailing Address:

35 OCEAN REEF DRIVE  
KEY LARGO, FL 33037

## New Mailing Address:

PMB 175, 24 DOCKSIDE LANE  
KEY LARGO, FL 33037

FEI Number: 20-4924762

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: PD ( ) Delete  
Name: GREENBERG, MAURICE R  
Address: 35 OCEAN REEF DRIVE  
City-St-Zip: KEY LARGO, FL 33037 US

Title: VSD ( ) Delete  
Name: LUNDQVIST, BERTIL  
Address: 35 OCEAN REEF DRIVE  
City-St-Zip: KEY LARGO, FL 33037 US

Title: TAS ( ) Delete  
Name: TUCKER, WILLIAM  
Address: 35 OCEAN REEF DRIVE  
City-St-Zip: KEY LARGO, FL 33037 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDCC (X) Change ( ) Addition  
Name: GREENBERG, MAURICE  
Address: 399 PARK AVENUE, 17TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

Title: VSD (X) Change ( ) Addition  
Name: LUNDQVIST, BERTIL  
Address: 399 PARK AVENUE, 17TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

Title: T (X) Change ( ) Addition  
Name: TUCKER, WILLIAM  
Address: 90 PARK AVENUE, 7TH FLOOR  
City-St-Zip: NEW YORK, NY 10016 US

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: BERTIL LUNDQVIST

VSD

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date