

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104222

Entity Name: HOTOGOMB USA, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

C/O DAVID A. WEBSTER  
450 N WYMORE RD  
WINTER PK, FL 32789

## New Principal Place of Business:

3680 AVALON PARK EAST BLVD. STE 300  
ORLANDO, FL 32828

## Current Mailing Address:

C/O DAVID A. WEBSTER  
450 N WYMORE RD  
WINTER PK, FL 32789

## New Mailing Address:

3680 AVALON PARK EAST BLVD. STE 300  
ORLANDO, FL 32828

FEI Number: 98-0155066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

W&P SERVICES, INC.  
450 N WYMORE RD  
WINTER PK, FL 32789 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: KAHLI, BEAT M  
Address: 13001 FOUNDERS SQ DR  
City-St-Zip: ORLANDO, FL 32828

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: KAHLI, BEAT M  
Address: 3680 AVALON PARK EAST BLVD. STE 300  
City-St-Zip: ORLANDO, FL 32828

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: BEAT KAHLI

DP

04/24/2009

Electronic Signature of Signing Officer or Director

Date