

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107024

FILED
Mar 06, 2008
Secretary of State

Entity Name: EUOTRUST INVESTMENTS USA, INC.

Current Principal Place of Business:

19312 LA SERENA DR.
FORT MYERS, FL 33967

New Principal Place of Business:

19312 LA SERENA DR.
FORT MYERS, FL 33967 US

Current Mailing Address:

19312 LA SERENA DR.
FORT MYERS, FL 33967

New Mailing Address:

19312 LA SERENA DR.
FORT MYERS, FL 33967 US

FEI Number: 20-5772258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALESTEIN, WILLEM
16500 COLLINS AVENUE #1855
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

MALESTEIN, WILLEM T
19312 LA SERENA DR.
FORT MYERS, FL 33967 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: WILLEM MALESTEIN

03/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MALESTEIN, WILLEM T
Address: 16500 COLLINS AVE., #1855
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: D () Delete
Name: MALESTEIN, CARLINA L
Address: 16500 COLLINS AVE., #1855
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MALESTEIN, WILLEM T
Address: 19312 LA SERENA DR.
City-St-Zip: FORT MYERS, FL 33967 US

Title: D (X) Change () Addition
Name: MALESTEIN, CARLINA
Address: 19312 LA SERENA DR.
City-St-Zip: FORT MYERS, FL 33967 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: WILLEM MALESTEIN

D

03/06/2008

Electronic Signature of Signing Officer or Director

Date