2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000100889

Entity Name: ROMAN GROUP USA, INC

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8357 W FLAGLER ST STE 351 1800 N BAYSHORE DR

MIAMI, FL 33144 1514

MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

8357 W FLAGLER ST STE 351 P.O. BOX 720253 MIAMI, FL 33144 P.O. BOX 720253

FEI Number: 26-0885933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORALES, OLGA P
8357 W FLAGLER ST STE 351
MIAMI, FL 33144 US
MORALES, OLGA P
1800 N BAYSHORE DR
1514
MIAMI, FL 33132 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: OLGA P. MORALES 04/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: ROMAN, CARLOS H ROMAN, CARLOS H

Address: 8357 W FLAGLER ST STE 351 Address: 1800 N BAYSHORE DR # 1514

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33132

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: MORALES, OLGA P Name: MORALES, OLGA P

Address: 8357 W FLAGLER ST STE 351 Address: 1800 N BAYSHORE DR # 1514

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33132

Title: T () Delete Title: T (X) Change () Addition Name: MONCADA, MARLEY Name: MONCADA, MARLEY

Address: 8357 W FLAGLER ST STE 351 Address: 1800 N BAYSHORE DR # 1514

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33132

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: OLGA P MORALES V 04/07/2009