

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30427

FILED  
Mar 25, 2010  
Secretary of State

**Entity Name:** MAISONS MARQUES & DOMAINES USA INC.

**Current Principal Place of Business:**

383 FOURTH STREET  
SUITE 400  
OAKLAND, CA 94607

**New Principal Place of Business:**

**Current Mailing Address:**

383 FOURTH STREET  
SUITE 400  
OAKLAND, CA 94607

**New Mailing Address:**

**FEI Number:** 94-3038588      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** CD  
**Name:** ROUZAUD, JEAN-CLAUDE  
**Address:** 21 BLVD. LUNDY  
**City-St-Zip:** REIMS, FRANCE,

**Title:** S  
**Name:** BELL, HOWARD H.  
**Address:** 38 LAQUESTA  
**City-St-Zip:** ORINDA, CA

**Title:** P  
**Name:** BALOGH, GREGORY  
**Address:** 383 FOURTH STREET, STE 400  
**City-St-Zip:** OAKLAND, CA 94607

**Title:** VCFO  
**Name:** FOUILLERON, GUILLAUME  
**Address:** 383 FOURTH STREET, STE 400  
**City-St-Zip:** OAKLAND, CA 94607

I hereby 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 all other like empowered.

SIGNATURE: GUILLAUME FOUILLERON

CFO

03/25/2010

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

\_\_\_\_\_  
Date