

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000018429

Entity Name: ZWAARDVIS USA, INC.

FILED
Mar 05, 2008
Secretary of State

Current Principal Place of Business:

C/O RADLER
19951 NE 10TH PLACE WAY
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

C/O SAUL RADLER C.P.A., P.A.
19951 NE 10TH PLACE WAY
MIAMI, FL 33179

New Mailing Address:

C/O RADLER
19951 NE 10TH PLACE WAY
MIAMI, FL 33179

FEI Number: 65-0579843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RADLER, SAUL C.P.A.
19951 NE 10TH PLACE WAY
MIAMI, FL 33179 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: VAN DER LANDE, A A J
Address: 19951 NE 10TH PLACE WAY
City-St-Zip: MIAMI, FL 33179

Title: PST () Delete
Name: VAN DER LANDE, A.A.J.
Address: 19951 NE 10TH PLACE WAY
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SAUL RADLER

REG

03/05/2008

Electronic Signature of Signing Officer or Director

_____ Date