

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000026607

Entity Name: BLASER TRADING USA, INC.

FILED
Mar 10, 2009
Secretary of State

Current Principal Place of Business:

7501 NW 4TH STREET
SUITE 201
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

7501 NW 4TH STREET
STE 201
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 65-0583532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORCHIN, DAVID CPA
5531 NORTH UNIVERSITY DRIVE
SUITE 103
PLANTATION, FL 33067 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: BLASER, MARKUS
Address: 7501 NW 4TH ST #201
City-St-Zip: PLANTATION, FL 33317

Title: VD () Delete
Name: PETER, SCHNEIDER
Address: 7501 NW 4TH ST #201
City-St-Zip: PLANTATION, FL 33317

Title: DIR () Delete
Name: PRETE, SERGIO
Address: 7501 NW 4TH STREET STE # 201
City-St-Zip: PLANTATION, FL 33317

Title: EXEC () Delete
Name: KAEPELI, MARC
Address: 7501 NW 4TH STREET STE # 201
City-St-Zip: PLANTATION, FL 33317

Title: MGR () Delete
Name: SOUSA, WALDIMIR B
Address: 7501 NW 4TH STREET STE # 201
City-St-Zip: PLANTATION, FL 33317

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: EXEC () Change (X) Addition
Name: MILLEMACI, MARIA L
Address: 7501 NW 4TH STREET SUITE # 201
City-St-Zip: PLANTATION, FL 33317

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: WALDIMIR B. SOUSA

MSG

03/10/2009

Electronic Signature of Signing Officer or Director

_____ Date