2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000085973

Entity Name: GOLDI (USA) INC.

FILED Mar 31, 2006 Secretary of State

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

902 SPANISH MOSS TRAIL 801 LAUREL OAK DRIVE PELICAN MARSH

SUITE 303 NAPLES, FL 34108 NAPLES, FL 34108

Current Mailing Address: New Mailing Address:

801 LAUREL OAK DRIVE 902 SPANISH MOSS TRAIL PELICAN MARSH SUITE 303

NAPLES, FL 34108 US NAPLES, FL 34108 US

FEI Number: 65-0702493 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:

BENEDETTO, ROBERT D ANSPACH, ANN CPA 4099 TAMIAMI TRAIL NORTH SUITE 200 801 LAURÉL OAK DRIVE NAPLES, FL 34103 SUITE 303

NAPLES, FL 34108 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: ANN ANSPACH 03/31/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: (X) Change () Addition

TSCHOEKE, ERNST Name: TSCHOKE, ERNST Name: 902 SPANISH MOSS TRIAL P.O. BOX 771123 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34107 US

VPT Title: VPT Title: () Delete (X) Change () Addition

Name: TSCHOKE, SIGRID Name: TSCHOEKE, SIGRID 902 SPANISH MOSS TRAIL KNUELLWEG 1 Address: Address:

NAPLES, FL 34109 HANAU GERMANY, HE 63456 DE City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition TSCHOKE, KEVIN TSCHOEKE, KEVIN Name: Name:

LIETZENSEE VFER 9 LIETZENSEE UFER 9 Address: Address:

City-St-Zip: BERLIN GERMANY, 14057 City-St-Zip: BERLIN GERMANY, BE 14057 DE

Title: () Delete Title: (X) Change () Addition

TSCHOKE, DENNIS TSCHOEKE, DÉNNIS Name: Name:

Address: KNUELLWEG 1 Address: KNUELLWEG 1 City-St-Zip: HANAU, GERMANY, 63456 City-St-Zip: HANAU, GERMANY, HE 63456 DE

I hereby certify that the information supplied with this filing does not qualify for the 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: ERNST TSCHOEKE **PSD** 03/31/2006