

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058831

FILED
Apr 29, 2009
Secretary of State

Entity Name: GOLDEN PHAROS USA, INC.

Current Principal Place of Business:

700 ATLANTIS BLVD
UNIT 101
MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

700 ATLANTIS BLVD
UNIT 101
MELBOURNE, FL 32904 US

New Mailing Address:

FEI Number: 59-3459502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGE, JANICE M
700 ATLANTIS BLVD
UNIT 101
MELBOURNE, FL 32904 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: D () Delete
Name: KAMARUDDIN, JALIL N
Address: 127 INVERNESS TERRACE LONDON
City-St-Zip: UNITED KINGDOM, XX 00000 UK

Title: ST () Delete
Name: GEORGE, JANICE M.
Address: 453 N. NEPTINE DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: D () Delete
Name: POMROY, MICHAEL F
Address: 2325 SEA HORSE DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32904 US

Title: D () Delete
Name: NONE, NONE
Address: NONE
City-St-Zip: NONE, XX 0000

Title: D () Delete
Name: AMIN, AHMAD YUSRI MD
Address: 8, JALAN SS5B/5, KELANA JAYA
City-St-Zip: SELANGOR, MALAYSIA, XX 00000 MY

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:

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: JANICE M GEORGE

ST

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date