2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000043208

Entity Name
 ROMO USA, INC.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business

C/O BERABAL TREUHAND AG CELLERTSTR 18, P.O. BOX 129 H-4020 BASEL, H-402 Mailing Address

LEWIS BIRCH & RICARDO PA, ATTN: D. BIRCH 1401 COURT STREET

CLEARWATER, FL 33756 U



DO NOT WRITE IN THIS SPACE

01162007 No Chg-P CR2E034 (11/05)

4. FEI Number
98-0192181

S. Certificate of Status Desired

Applied For Not Applicable

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324

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				IIN	INIS SPACE
	named entity submits this statement for the priors of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signalure, lyped or printed name of registered agont and the d	applicable. (NQTE: Registered Ag	ont agnature	required when reinstating)	DAIE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			000000622128 02/13/07~80013~016 150.00
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIEDER, RUDOLPH GELLERTSTRASSE 18 BASEL, SWITZERLAND.				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEIER, RUDOLPH GELLERTSTRASSE 18 BASEL, SWITZERLAND,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I turther certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment of the property o

SIGNATURE:

NAME STREET ADORESS CITY-ST-ZIP ...

Rudolf Peier

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone it