2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086826

City-St-Zip:

DEERFIELD BEACH, FL 33442

Entity Name: CASTELLANO-BELTRAME USA INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: DESIGN CENTER AT QUIET WATERS 324 SOUTH POWERLINE ROAD DEERFIELD BEACH, FL 33442 **Current Mailing Address: New Mailing Address:** DESIGN CENTER AT QUIET WATERS 324 SOUTH POWERLINE ROAD DEERFIELD BEACH, FL 33442 FEI Number: 65-0869961 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: HEUNIS, IAN 324 S. POWERLINE RD. DEERFIELD BEACH, FL 33442 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HEUNIS, IAN Name: Name: 324 SO POWERLINE ROAD Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BELTRAME, FRANCO Name: 324 SO POWERLINE ROAD Address: Address: DEERFIELD BEACH, FL 33442 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition HEYWOOD, CLAUDIA Name: Name: 324 SO POWERLINE ROAD Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: () Delete Title: () Change () Addition BELTRAME, VITTORIO Name: Name: Address: 324 SO POWERLINE ROAD Address:

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.

City-St-Zip:

SIGNATURE: IAN HEUNIS CD 01/04/2008