# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# P98000105858

**Entity Name:** SYLVERAIN US CORP., INC.

**Current Principal Place of Business:**

12397 S ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

12397 S ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

**New Mailing Address:**

**FEI Number: 59-3569543** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OFORTUNE, SYLVERAIN
12397 S ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 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: P ( ) Delete
Name: SYLVERAIN, O'FORTUNE
Address: 1148 TIMBERLAND CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: V ( ) Delete
Name: SYLVERAIN, ADRIENNE
Address: 1148 TIMBERBEND CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: S ( ) Delete
Name: SYLVERIAN MATTHIAS,
Address: 1148 TIMBERLAND CIRCLE
City-St-Zip: ORLANDO, FL 32824

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: SYLVERAIN, O'FORTUNE
Address: 1743 SIR JOHN COURT
City-St-Zip: ORLANDO, FL 32837

Title: V (X) Change ( ) Addition
Name: SYLVERAIN, ADRIENNE
Address: 1743 SIR JOHN COURT
City-St-Zip: ORLANDO, FL 32837

Title: S (X) Change ( ) Addition
Name: SYLVERIAN, MATTHIAS
Address: 1743 SIR JOHN COURT
City-St-Zip: ORLANDO, FL 32837

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: OFORTUNE SYLVERAIN P 04/30/2009

Electronic Signature of Signing Officer or Director Date