

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001961

FILED
Apr 29, 2009
Secretary of State

Entity Name: NANBEI US INC.

Current Principal Place of Business:

255 ALHAMBRA
STE 680
CORAL GABLES, FL 33134

Current Mailing Address:

999 PONCE DE LEON
STE 1045
CORAL GABLES, FL 33134 US

FEI Number: 13-5034940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

255 ALHAMBRA CIRCLE
STE 350
CORAL GABLES, FL 33134

New Mailing Address:

C/O CAROL FABER AT AKERMAN SENTERFITT
ONE SE THIRD AVENUE, 25TH FLOOR
MIAMI, FL 33131 US

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PD () Delete
Name: SELMAN, ELIAS
Address: AV. APOQUINDO #4499, PISO 10, LAS CONDES
City-St-Zip: SANTIAGO, CHILE, CH

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: SELMAN, ELIAS
Address: ANTONIA LOPEZ DE BELLO 172 PISO 3
City-St-Zip: RECOLETA SANTIAGO, CHILE, CH XX XX

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: ELIAS SELMAN

CEO

04/29/2009

Electronic Signature of Signing Officer or Director

Date