

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08664

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: SYSTRA CONSULTING, INC.

**Current Principal Place of Business:**

150 CLOVE ROAD, 7TH FLOOR  
LITTLE FALLS, NJ 074242138 US

**New Principal Place of Business:**

**Current Mailing Address:**

150 CLOVE ROAD, 7TH FLOOR  
LITTLE FALLS, NJ 074242138 US

**New Mailing Address:**

FEI Number: 22-2593414      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PCEO ( ) Delete  
Name: STARK, CHARLES  
Address: 150 CLOVE ROAD, 7TH FLOOR  
City-St-Zip: LITTLE FALLS, NJ 07424

Title: D ( ) Delete  
Name: CORNIL, MICHEL  
Address: 5 AVE DU COQ  
City-St-Zip: PARIS, FR 75009

Title: VT ( ) Delete  
Name: HARTWIG, GARRY A.,  
Address: 150 CLOVE ROAD, 7TH FLOOR  
City-St-Zip: LITTLE FALLS, NJ 07424

Title: D ( ) Delete  
Name: CITROEN, PHILIPPE  
Address: 5 AVENUE DU COG  
City-St-Zip: PARIS FRANCE, 75009

Title: D (X) Delete  
Name: REYNIER, JEAN CLAUDE  
Address: 5 AVENUE DU COG  
City-St-Zip: PARIS FRANCE, 75009

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

Title: P (X) Change ( ) Addition  
Name: DIAZ, DIEGO  
Address: 150 CLOVE ROAD, 7TH FLOOR  
City-St-Zip: LITTLE FALLS, NJ 07424

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: GARRY A. HARTWIG

Electronic Signature of Signing Officer or Director

VT

03/24/2009

\_\_\_\_\_ Date