

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30427

FILED
Feb 26, 2009
Secretary of State

Entity Name: MAISONS MARQUES & DOMAINES USA INC.

Current Principal Place of Business:

383 FOURTH STREET
SUITE 400
OAKLAND, CA 94607

New Principal Place of Business:

Current Mailing Address:

383 FOURTH STREET
SUITE 400
OAKLAND, CA 94607

New Mailing Address:

FEI Number: 94-3038588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH 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: CD () Delete
Name: ROUZAUD, JEAN-CLAUDE,
Address: 21 BLVD. LUNDY
City-St-Zip: REIMS, FRANCE,

Title: S () Delete
Name: BELL, HOWARD H.,
Address: 38 LAQUESTA
City-St-Zip: ORINDA, CA

Title: P () Delete
Name: BALOGH, GREGORY
Address: 383 FOURTH STREET, STE 400
City-St-Zip: OAKLAND, CA 94607

Title: VCFO () Delete
Name: FOUILLERON, GUILLAUME
Address: 383 FOURTH STREET, STE 400
City-St-Zip: OAKLAND, CA 94607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GUILLAUME FOUILLERON

CFO

02/26/2009

Electronic Signature of Signing Officer or Director

_____ Date