

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093241

FILED
Jan 08, 2008
Secretary of State

Entity Name: USA INVESTMENT ONE, LLC

Current Principal Place of Business:

11230 NW 73 TERRACE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

11230 NW 73 TERRACE
MIAMI, FL 33178

New Mailing Address:

FEI Number: 20-3509039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSTOS, ENNIO E
482 TALAVERA ROAD
WESTON, FL 33326 US

Name and Address of New Registered Agent:

DE FREITAS, JUALI
11230 NW 73 TERRACE
MIAMI, FL 33178 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: JUALI DE FREITAS

01/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADMIRAL YACHTING INV, ESTMENT S.A.
Address: 11230 NW 73 TERRACE
City-St-Zip: MIAMI, FL 33178

Title: MGRM () Delete
Name: DE FREITAS BELLO, IVEL CRISTINA
Address: 45 HOSPITAL AVE APT:2
City-St-Zip: DANBURY, CT 06810

Title: MGRM () Delete
Name: DE FREITAS BELLO, JUALI
Address: 11230 NW 73 TERRACE
City-St-Zip: MAIMI, FL 33178

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUALI DE FREITAS

MGRM

01/08/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date