


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90027 008 ***150.00

DOCUMENT # P01000057117

1. Entity Name
HAI GROUP USA, INC.



Principal Place of Business
**C/O ROTH ROUSSO & DARRACH PA
 3440 HOLLYWOOD BLVD STE 360
 HOLLYWOOD, FL 33021**

Mailing Address
**C/O ROTH ROUSSO & DARRACH PA
 3440 HOLLYWOOD BLVD STE 360
 HOLLYWOOD, FL 33021**

2. Principal Place of Business
18851 NE 29th Ave

Suite, Apt. #, etc.
900

3. Mailing Address
18851 NE 29th Ave

Suite, Apt. #, etc.
900

City & State
AVENTURA Florida


City & State
AVENTURA, FL

Zip
33180

Country
USA

Zip
33180

Country
USA



02232004 Chg-P CR2E034 (10/03)

4. FEI Number
65-1123534

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ROTH, LEONARDO A ESQ
 C/O ROTH ROUSSO & DARRACH PA
 3440 HOLLYWOOD BLVD STE 360
 HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name
ROTH LEONARDO A - Esq

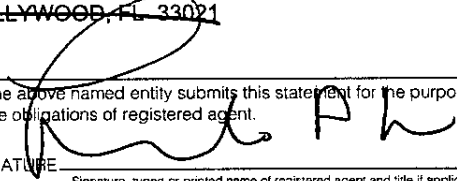
Street Address (P.O. Box Number is Not Acceptable)
18851 NE 29th Ave Suite 900

City
AVENTURA

State
FL

Zip Code
33180

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **LEONARDO A. ROTH, Esq** DATE **02/24/04**

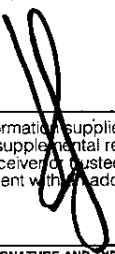
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HORIGIAN, FERNANDO 3440 HOLLYWOOD BLVD STE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SANTURIAN, RUBEN 3440 HOLLYWOOD BLVD STE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HORIGIAN, JOSE 3440 HOLLYWOOD BLVD, SUITE 360 HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 18851 NE 29th Ave Suite 900 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with the address, with all other like empowered.

SIGNATURE:  **Fernando Horigian** Date **02/24/04** Daytime Phone # **786-279-0000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR