

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132149

Entity Name: TELEFONICA DATA USA, INC.

FILED  
Jul 20, 2006  
Secretary of State

## Current Principal Place of Business:

1111 BRICKELL AVENUE  
10TH FLOOR  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

1111 BRICKELL AVENUE  
10TH FLOOR  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 52-2215332

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUARLES, THOMAS J  
2200 MUSEUM TOWER  
150 WEST FLAGLER ST.  
MIAMI, FL 33130 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: QUINN, BERNARDO  
Address: 1111 BRICKELL AVE., 10TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: ROS, JUAN C  
Address: 1111 BRICKELL AVE., 10TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: S (X) Delete  
Name: PAREJA, CRISTINIA  
Address: 1111 BRICKELL AVE., 10TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: CEO ( ) Delete  
Name: PIZARRO, PETE  
Address: 1111 BRICKELL AVENUE, 10TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: AS ( ) Delete  
Name: QUARLES, THOMAS J  
Address: 150 WEST FLAGLER STREET STE 2200  
City-St-Zip: MIAMI, FL 33130

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: ROS, JUAN C  
Address: 1111 BRICKELL AVE., 10TH FLOOR  
City-St-Zip: MIAMI, FL 33131

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 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: THOMAS J. QUARLES

AS

07/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date