

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085275

FILED
Feb 28, 2007
Secretary of State

Entity Name: D & P INTERNATIONAL USA INC.

Current Principal Place of Business:

16300 NE. 19TH AVENUE - SUITE 253
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

18365 NE 30 AVE.
NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 240
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 20-1379814 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS, GABRIEL
2121 PONCE DE LEON BLVD SUITE 240
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PRATS FERNANDEZ & CO. PA.
2121 PONCE DE LEON BLVD SUITE 240
CORAL GABLES, FL 33134 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: GABRIEL PRATS 02/28/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOSADA, GABRIEL
Address: 16300 NE. 19TH AVENUE - SUITE 253
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: STD () Delete
Name: OCHOA, VANESSA
Address: 16300 NE. 19TH AVENUE - SUITE 253
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOSADA, GABRIEL
Address: 18365 NE 30 AVE.
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: STD (X) Change () Addition
Name: OCHOA, VANESSA
Address: 18365 NE 30 AVE.
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

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: GABRIEL LOSADA P 02/28/2007

Electronic Signature of Signing Officer or Director Date