

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000058631

FILED
Apr 12, 2005
Secretary of State

Entity Name: RIO BLANCO CAPITAL MANAGEMENT (USA) CORP.

Current Principal Place of Business:

% INTERNATIONAL EXECUTIVE OFFICES
2665 S. BAYSHORE DR. SUITE 906
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

% INTERNATIONAL EXECUTIVE OFFICES
2665 S. BAYSHORE DR. SUITE 906
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 65-0523279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, CESAR L
1221 BRICKELL AVENUE
MIAMI, FL 33131 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: DPS () Delete
Name: KRIETE, ROBERTO
Address: 2665 S. BAYSHORE DR., STE 906
City-St-Zip: MIAMI, FL 33133

Title: DT () Delete
Name: PALOMO, JOAQUIN
Address: 2665 S. BAYSHORE DR., STE 906
City-St-Zip: MIAMI, FL 33133

Title: AS () Delete
Name: BLOCH, FEDERICO
Address: 2665 S. BAYSHORE DR., STE 906
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: AS (X) Change () Addition
Name: KRIETE, FLORENCE
Address: 2665 S. BAYSHORE DR., STE 906
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERTO KRIETE

DPS

04/12/2005

Electronic Signature of Signing Officer or Director

_____ Date