

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000100996

Entity Name: PLAM USA, CORP.

Current Principal Place of Business:

5401 COLLINS AVENUE, UNIT 835
MIAMI BEACH, FL 33140

Current Mailing Address:

2000 PONCE DE LEON BLVD., SUITE 617
CORAL GABLES, FL 33134

FEI Number: 90-0917954

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARBOSA LAW OFFICE.
2000 PONCE DE LEON BLVD
SUITE 625
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name FARAGONE, ANTONIO A
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

Title DV
Name TASSINARI FARAGONE, NILVA M
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

Title SD
Name TASSINARI FARAGONE, MAURICIO
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

Title DS
Name TASSINARI FARAGONE, MAURICIO
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

Title DS
Name TASSINARI FARAGONE, LUCIANA
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

Title DT
Name TASSINARI FARAGONE, PATRICIA
Address 5401 COLLINS AVENUE, UNIT 835
City-State-Zip: MIAMI BEACH FL 33140

I hereby 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 all other like empowered.

SIGNATURE: MAURICIO TASSINARI FARAGONE

D

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date