

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 581811

FILED
Apr 27, 2006
Secretary of State

Entity Name: GRANTURISMO U.S.A., INC.

Current Principal Place of Business:

288 ARAGON AVE
STE A
CORAL GABLES, FL 33134 US

New Principal Place of Business:

7270 NW 12 STREET
STE 740
MIAMI, FL 33126 US

Current Mailing Address:

288 ARAGON AVE
STE A
CORAL GABLES, FL 33134 US

New Mailing Address:

7270 NW 12 STREET
STE 740
MIAMI, FL 33126 US

FEI Number: 59-1869871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROANO, GABRIELA
4244 PINE RIDGE CT
WESTON, FL 33326 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: C () Delete
Name: PROANO, EDUARDO A
Address: 1018 SUNFLOWER CIRCLE
City-St-Zip: WESTON, FL 33327

Title: P () Delete
Name: PROANO, GABRIELA
Address: 4244 PINE RIDGE CT
City-St-Zip: WESTON, FL 33326

Title: VP () Delete
Name: ROMAN, MARCELO
Address: 9930 SW 142 ST
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: PROANO, FELIPE
Address: 4363 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331

Title: S () Delete
Name: PAREJA, ESTEBAN
Address: 8475 NW 66 ST
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GABRIELA PROANO

MGR

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date