
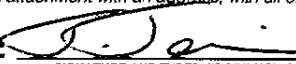


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 597640 1. Entity Name U.S. INDUSTRIAL EXPORTS INC.					
Principal Place of Business 10351 S.W. 113 STREET MIAMI, FL 33176		Mailing Address 10351 S.W. 113 STREET MIAMI, FL 33176			
DO NOT WRITE IN THIS SPACE					
				01182006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-1895374		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent JARDIM, ALLAN P 10351 SW 113TH ST MIAMI, FL 33176				DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		PD JARDIM, ALLAN P 10351 S.W. 113 STREET MIAMI, FL			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		SD JARDIM, JACQUELINE A. 10351 S.W. 113 ST. MIAMI, FL			
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		1/27/06 305-299-4863			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			