2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004180

Entity Name: OPERACIONES USA, INC.

FILED Feb 17, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3785 NW 82ND AVENUE

SUITE 109

DORAL, FL 33166 US

Current Mailing Address: New Mailing Address:

3785 NW 82ND AVENUE SUITE 109 DORAL, FL 33166 US

FEI Number: 52-2231955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD STE 250 PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CEO

Name: NEJAMKIS, MARIANO

Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

Title: SEC

Name: SCHLOSSBERG, GUSTAVO M Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

Title: DIR

Name: SAGIER, LUIS

Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

Title: DIR

Name: GRINBAUN, GUIDO

Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

Title: DIR

Name: SAJAROFF, MARCELO

Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

Title: DIR

Name: LOMANTO, EDUARDO

Address: 3785 NW 82ND AVENUE SUITE 109

City-St-Zip: DORAL, FL 33166

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: MARIANO NEJAMKIS CEO 02/17/2011