

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002403

Entity Name: CGP USA, INC.

FILED  
Jun 09, 2004  
Secretary of State

## Current Principal Place of Business:

OMAR HODGE BLDG., 2ND FL  
WICKHAMS CAY I, ROAD TOWN, TORTOLA  
BRITISH VIRGIN ISLAND,

## Current Mailing Address:

404 WASHINGTON AVE., 8TH FL  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

OMAR HODGE BLDG., 2ND FL  
WICKHAMS CAY I, ROAD TOWN, TORTOLA  
BRITISH VIRGIN ISLAND, BV

## New Mailing Address:

1550 BISCAYNE BLVD.  
1ST. FLOOR  
MIAMI, FL 33132

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SERVO LIMITED,  
Address: OMAR HODGE BLDG., 2ND FL, TORTOLA  
City-St-Zip: BRITISH VIRGIN ISLAND,

Title: P ( ) Delete  
Name: RESTREPO, ROSA  
Address: OMAR HODGE BLDG., 2ND FL, TORTOLA  
City-St-Zip: BRITISH VIRGIN ISLAND,

Title: S ( ) Delete  
Name: MACTAVIOUS, ANNETTE  
Address: OMAR HODGE BLDG., 2ND FL, TORTOLA  
City-St-Zip: BRITISH VIRGIN ISLAND,

## 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:

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: ROSA RESTREPO

P

06/09/2004

Electronic Signature of Signing Officer or Director

Date