2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003773

Entity Name: BLUNAUTA USA, INC.

FILED Feb 27, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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DONALD E. THOMPSON BLUNAUTA USA INC.

2255 GLADES RD. #340W 20801 BISCAYNE BLVD. SUITE 403 BOCA RATON, FL 33431 OC AVENTURA, FL 33180 OC

Current Mailing Address: New Mailing Address:

DONALD E. THOMPSON BLUNAUTA USA INC.

2255 GLADES RD. #340W 20801 BISCAYNE BLVD. SUITE 403 BOCA RATON, FL 33431 OC AVENTURA, FL 33180 OC

FEI Number: 98-0377818 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:

LEXISNEXIS DOCUMENT SOLUTIONS, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: GRECO, ROBERTO Name: GRECO, ROBERTO

Address: 2255 GLADES ROAD SUITE 200E Address: 20801 BISCAYNE BLVD. SUITE 403

City-St-Zip: BOCA RATON, FL 33431 OC City-St-Zip: AVENTURA, FL 33180 OC

Title: D () Delete Title: P (X) Change () Addition

Name: FELIZIANI, GLAUDIO Name: FRANCESCHI, ELISABETTA

Address: 2355 GLADES ROAD SUITE 2005

 Address:
 2255 GLADES ROAD SUITE 200E
 Address:
 20801 BISCAYNE BLVD. SUITE 403

 City-St-Zip:
 BOCA RATON, FL 33431 OC
 City-St-Zip:
 AVENTURA, FL 33180 OC

Title: P (X) Delete Title: () Change () Addition

 Name:
 FRANCESCHI, ELISABETTA
 Name:

 Address:
 2255 GLADES ROAD SUITE 200E
 Address:

 City-St-Zip:
 BOCA RATON, FL 33431
 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: ELISABETTA FRANCESCHI MS. 02/27/2004