## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jul 31, 2006 8:00 am Secretary of State

DOCUMENT # F0400003091  1. Entity Name						0/-31-2006 90002 024 ***150.00			
USA REAL ESTATE PROFIT FUNDS, INC.									
Principal Place	e of Business	S	Mailing Address			1		Engage	3 H M
%CAMREAL EUROPEAN MGMT ONE YONGE ST #1801%CAMREAL EUROPEAN MG TORONTO ONTARIO CANADA M5E 1W7. XX CANADA M5E 1W7.						‡1801		500233	377
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2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.		07122006	Chg-P	CR2E034 (11/05)		
City & State			City & State		4. FEI Number 52-204			pplied For ot Applicable	
Zip Country		Zip	Country		5. Certificate	of Status Desired	S8.75 Add		
	6. Name	and Address of Current I	l Registered Agent	Į	I	7. Name and	Address of New R	<u>.</u>	-
CTCOPP	OPATION	I CVCTEM			Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324					Street Address (P.O. Box Number is Not Acceptable)				
					City			<b>⊏</b> ≀ Zip Coo	le .
The above named entity submits this statement for the purpose of changing its re					·			<u> </u>	
	named entiti ions of regist		the purpose of changing its	s register	ed office or registe	red agent, or bot	th, in the State of Fk	orida. I am familiar with,	and accept
SIGNATURE_	Signature, typed	or printed name of registered agent a	and trile if applicable. (NO	TE: Registere	d Agent signature require	ed when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00  Due by September 6, 2006  9. Election Campaign Financia Trust Fund Contribution.									
						i.00 May Be ded to Fees		with s. 607.193(2)(b), not receive the prior	
	ue by Sep		Trust Fund Con			ded to Fees	corporation did	not receive the prior	notice.
10. TITLE	D Sep	OFFICERS AND	Trust Fund Con	11,	Add	ADDITIONS/	corporation did	not receive the prior	notice.
10. TITLE NAME	D MEDLA:	OFFICERS AND	Trust Fund Con	11.	Add	ded to Fees	corporation did	not receive the prior	notice.
10. TITLE	D MEDLA, A	OFFICERS AND	Trust Fund Con	11, TITL NAM	Add	ADDITIONS/	corporation did	not receive the prior	notice.
10. TITLE NAME STREET ADDRESS	D MEDLA, A	OFFICERS AND OFFIC	Trust Fund Con	11, TITL NAM	Add	ADDITIONS/	corporation did	not receive the prior	notice.
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Indeedy certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Fronds statutes. From the 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: