2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001826

Entity Name: ANCOP FOUNDATION (USA), INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
314 MOUNTAIN ALDER LANE FLETCHER, NC 28732							
Current Mailing Address:				New Mailing Address:			
3506 COUNTRY CREEK LANE VALRICO, FL 335946402				3506 COUNTRY CREEK LANE VALRICO, FL 335966402			
FEI Number: 68-0463495 FEI Number Applied For () FEI Nu			FEI Num	nber Not Applicable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BARLAAN, ARTHUR 3506 COUNTRY CREEK LANE VALRICO, FL 33594 US				BARLAAN, ARTHUR 3506 COUNTRY CREEK LANE VALRICO, FL 33596 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:				04/29/2008			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$			
Title: Name: Address: City-St-Zip:	C () D AGUILING, SONN 701 HORY ST CRANFORD, NJ			Title: Name: Address: City-St-Zip:	C (X) CUENCA, RICKY 12936 S FIGUER LOS ANGELES,	ROA ST	dition
Title: Name: Address: City-St-Zip:	PRES () D CABRERA, ROSE 6993 GRAND JUN LAS VEGAS, NV	ICTION AVE		Title: Name: Address: City-St-Zip:	ED (X) CABRERA, ROS 6993 GRAND JU LAS VEGAS, NV	INCTION AVE	dition
Title: Name: Address: City-St-Zip:	CFO () D LAENO, STAN 25241 DENNY RO TORRANCE, CA			Title: Name: Address: City-St-Zip:	() (Change () Add	dition
Title: Name: Address: City-St-Zip:	VP () D MILLARES, JOE 3389 BRADEN CT SAN JOSE, CA 9			Title: Name: Address: City-St-Zip:	() (Change () Ado	dition
Title: Name: Address: City-St-Zip:	S () D REYES, LYNDEE 25624 SALERNO YORBA LINDA, C	WAY		Title: Name: Address: City-St-Zip:	() (Change () Ado	dition
Title: Name: Address: City-St-Zip:	D () D VENTURA, TONY 314 MOUNTAIN A FLETCHER, NC 2			Title: Name: Address: City-St-Zip:	() (Change () Add	dition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY VENTURA D 04/29/2008