

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000252

FILED
Apr 29, 2005
Secretary of State

Entity Name: IMPSAT USA, INC.

Current Principal Place of Business:

2040 N DIXIE HWY
WILTON MANORS, FL 33394

New Principal Place of Business:

2040 N DIXIE HWY
WILTON MANORS, FL 33305

Current Mailing Address:

2040 N DIXIE HWY
WILTON MANORS, FL 33394

New Mailing Address:

2040 N DIXIE HWY
WILTON MANORS, FL 33305

FEI Number: 65-0600569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAVELO, JOHANNA
2040 NORTH DIXIE HWY
WILTON MANORS, FL 33305 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALONSO, HECTOR
Address: 2040 N DIXIE HWY
City-St-Zip: WILTON MANORS, FL 33305

Title: P () Delete
Name: CEBALLOS, MAURICIO
Address: 2040 NORTH DIXIE HWY
City-St-Zip: WILTON MANORS, FL 33305

Title: S () Delete
Name: RAVELO, JOHANNA
Address: 2040 NORTH DIXIE HWY.
City-St-Zip: WILTON MANORS, FL 33305

Title: T () Delete
Name: TORRES, JOSE
Address: 2040 N DIXIE HWY
City-St-Zip: WILTON MANORS, FL 33305

Title: D () Delete
Name: VERDAGUER, RICARDO
Address: 2040 N DIXIE HWY
City-St-Zip: WILTON MANORS, FL 33305

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: TORRE GOMEZ, MARIANO
Address: 2040 N DIXIE HWY
City-St-Zip: WILTON MANORS, FL 33305

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: JOHANNA RAVELO

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04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date