

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013927

Entity Name: CISA TRADING USA LLC

FILED  
Apr 20, 2010  
Secretary of State

## Current Principal Place of Business:

8410 NW 53RD TERRACE, SUITE 112  
MIAMI, FL 33166

## New Principal Place of Business:

8410 NW 53RD TERRACE, SUITE 112  
112  
MIAMI, FL 33166

## Current Mailing Address:

8410 NW 53RD TERRACE, SUITE 112  
MIAMI, FL 33166

## New Mailing Address:

8410 NW 53RD TERRACE, SUITE 112  
112  
MIAMI, FL 33166

FEI Number: 65-1053827

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERNANDEZ, EDUARDO ESQ.  
501 BRICKELL KEY DR., SUITE 400  
MIAMI, FL 33131 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

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: GUASTI, ANDREA  
Address: 8410 NW 53RD TERRACE, SUITE 112  
City-St-Zip: MIAMI, FL 33166

Title: MGR  
Name: DOS SANTOS, CLAUDIO  
Address: 8410 NW 53RD TERRACE, SUITE 112  
City-St-Zip: MIAMI, FL 33166

Title: MGR  
Name: PARGANA, ANTONIO  
Address: 8410 NW 53RD TERRACE, SUITE 112  
City-St-Zip: MIAMI, FL 33166

Title: MGR  
Name: DE SOUZA TOLEDO, GILBERTO  
Address: 8410 NW 53RD TERRACE, SUITE 112  
City-St-Zip: MIAMI, FL 33166

Title: MGR  
Name: HYPPOLITO FILHO, MILTON  
Address: 8410 NW 53RD TERRACE, SUITE 112  
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRUNO ARRUDA ANDRADE

MGR

04/20/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date