

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L13688

Entity Name: CASA GRAFICA U.S.A., INC.

FILED
Feb 14, 2006
Secretary of State

Current Principal Place of Business:

4530 N. HIATUS ROAD
#114
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

4530 N. HIATUS ROAD
SUITE 114
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 65-0152654 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASANOVA, ROBERTO P
4530 N. HIATUS ROAD
SUITE 114
SUNRISE, FL 33351 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: P () Delete
Name: CASANOVA, ROBERTO
Address: 485 SABAL WAY
City-St-Zip: WESTON, FL 33326 US

Title: DP () Delete
Name: CASANOVA, DEBORAH
Address: 485 SABAL WAY
City-St-Zip: WESTON, FL 33326 US

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

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: VP () Change (X) Addition
Name: GIRATA, CARLOS F
Address: 4832 NW 116TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T () Change (X) Addition
Name: GIRATA, YANELLE M
Address: 4832 NW 116TH TERRACE
City-St-Zip: CORAL SPRINGS, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO CASANOVA

P

02/14/2006

Electronic Signature of Signing Officer or Director

_____ Date