

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L55077

Entity Name: CALOI USA INC.

FILED  
Jan 20, 2004  
Secretary of State

## Current Principal Place of Business:

90 INDUSTRIAL LOOP  
ORANGE PARK, FL 32073 US

## New Principal Place of Business:

## Current Mailing Address:

90 INDUSTRIAL LOOP  
ORANGE PARK, FL 32073 US

## New Mailing Address:

FEI Number: 59-2997919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARTER, ANDREW  
90 INDUSTRIAL LOOP N.  
ORANGE PARK, FL 32073 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: FERNANDES, JOSE L  
Address: AV GUIDO CALOI 1331  
City-St-Zip: SAC PAULO, BR 05802140

Title: V (X) Delete  
Name: HAGEN, THOMAS  
Address: 90 INDUSTRIAL LOOP N.  
City-St-Zip: ORANGE PARK, FL 32073

Title: S ( ) Delete  
Name: CARTER, ANDREW C  
Address: 90 INDUSTRIAL LOOP N.  
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete  
Name: MUSA, EDUARDO  
Address: AV GUIDO CALOI 1331  
City-St-Zip: SAO PAULO, BR 05802140

Title: D ( ) Delete  
Name: TRAD, RAYMOND JR  
Address: AV GUIDO CLOI 1331  
City-St-Zip: SAO PAULO, BR 05802140

## 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:

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: ANDREW CARTER

S

01/20/2004

Electronic Signature of Signing Officer or Director

Date