

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Mar 06, 2008  
Secretary of State**

**DOCUMENT# M84560**

**Entity Name:** INFO-BUY U.S.A. CORP.

**Current Principal Place of Business:**

8809 NW 23RD STREET  
DORAL, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

8809 NW 23RD STREET  
DORAL, FL 33172

**New Mailing Address:**

**FEI Number:** 65-0057145      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROS, MIGUEL  
10849 NASHVILLE DRIVE  
COOPER CITY, FL 33026      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

**OFFICERS AND DIRECTORS:**

Title: DPT      ( ) Delete  
Name: ROS, MIGUEL,  
Address: 10849 NASHVILLE DRIVE  
City-St-Zip: COOPER CITY, FL 33026

Title: DS      ( ) Delete  
Name: ROS, YOLANDA,  
Address: 10849 NASHVILLE DRIVE  
City-St-Zip: DORAL, FL 33026

Title: DV      ( ) Delete  
Name: ROS, JOSE,  
Address: 15281 SW 114 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: DT      (X) Delete  
Name: ROS, YOLANDA,  
Address: 10849 NASHVILLE DRIVE  
City-St-Zip: COOPER CITY, FL 33026

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP      (X) Change ( ) Addition  
Name: ROS, MIGUEL,  
Address: 10849 NASHVILLE DRIVE  
City-St-Zip: COOPER CITY, FL 33026

Title: DST      (X) Change ( ) Addition  
Name: ROS, YOLANDA,  
Address: 10849 NASHVILLE DRIVE  
City-St-Zip: DORAL, FL 33026

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 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: MIGUEL ROS

DP

03/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date