## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004428

FILED Jan 20, 2006 Secretary of State

Entity Name: INSTITUTO TECNOLOGICO Y DE ESTUDIOS SUPERIORES DE MONTERREY (USA), INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
3100 S. DIX 101	(IE HIGHWAY				
MIAMI, FL	33133 US				
Current Mailing Address:			New Maili	New Mailing Address:	
	(IE HIGHWAY				
101 MIAMI, FL	33133 US				
FEI Number:	65-1119680	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
799 BRICK 700 MIAMI, FL					
The above in the State		ubmits this statement for the p	urpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR		0:			
		c Signature of Registered Age		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LOPEZ DEL PUI E GARZA SADA	Delete ERTO, PATRICIO ING. 2501 CP IEXICO, MX 64849 MX	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	RANGEL SOSTN E GARZA SADA	Delete MANN, RAFAEL DR. 2501 CP IEXICO, MX 64849 MX	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CRUZ LIMON, C E GARZA SADA	Delete ARLOS ENRIQUE ING. 2501 CP IEXICO, MX 64849 MX	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	BUSTANI ADEM E GARZA SADA		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BONILLA, JAIME	IGHWAY, SUITE 101	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	RESCH, PETER	IGHWAY, SUITE 101	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition MUDESPACHER, GRETEL 3100 S. DIXIE HIGHWAY, SUITE 101 MIAMI, FL 33133 US	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GRETEL MUDESPACHER VP 01/20/2006