2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001299

Entity Name: USA-BRAZIL FAMILY VALUES, INC.

FILED May 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7001 GRAND NATIONAL DRIVE 100

ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

7001 GRAND NATIONAL DRIVE 100 ORLANDO, FL 32819 US

FEI Number: 20-2312647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BALDEZ NEVES, JOSE M
8436 LAKE BURDEN CIRCLE
WINDERMERE, FL 34786 US
BALDEZ NEVES, JOSE M
6292 TWAIN STREET
108
ORLANDO, FL 32835 US

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: JOSE M. BALDEZ-NEVES 05/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 BALDEZ NEVES, JOSE M
 Name:
 BALDEZ-NEVES, JOSE M

 Address:
 8436 LAKE BURDEN CIRCLE
 Address:
 6292 TWAIN STREET #108

 City-St-Zip:
 WINDERMERE, FL 34786 US
 City-St-Zip:
 ORLANDO, FL 32835 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: NEVES, RAFAEL Name: NEVES, RAFAEL

Address: 8436 LAKE BURDEN CIRCLE Address: 6292 TWAIN STREET #108
City-St-Zip: WINDERMERE, FL 34786 US City-St-Zip: ORLANDO, FL 32835 US

 Name:
 NEVES, JULIANA
 Name:
 NEVES, JULIANA

 Address:
 8436 LAKE BURDEN CIRCLE
 Address:
 6292 TWAIN STREET #108

 City-St-Zip:
 WINDERMERE, FL 34786 US
 City-St-Zip:
 ORLANDO, FL 32835 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: RAFAEL NEVES VP 05/15/2006