2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 08:00 A
Secretary of State

DOCUMENT # P00000048517

1. Entity Name
MOLDECO U.S.A., INC.

Principal Place of Business	Mailing Address
4995 NW 72ND AVENUE SUITE 205 MIAMI, FL 33166	4995 NW 72ND AVENUE SUITE 205 MIAMI, FL 33166

02152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1092090

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MESA, BAUDILIO
4995 NW 72ND AVENUE
SUITE 205
MIAMI, FL 33166

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MESA, BAUDILIO
STREET ADDRESS	4995 NW 72ND AVENUE, SUITE 205
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	D
NAME	DE LA ESPIRELLA, KATHIA P
STREET ADDRESS	3950 52ND STREET APT. 2B
CITY-ST-ZIP	NEW YORK, NY 11377
TITLE	D
NAME	DE LA ESPIRELLA, KATHIA P
STREET ADDRESS	3950 52ND STREET APT. 2B
CITY-ST-ZIP	NEW YORK, NY 11377
TITLE	D
NAME	MEZA, CARLOS
STREET ADDRESS	3950 52ND STREET APT. 2B
CITY-ST-ZIP	NEW YORK, NY 11377
TITLE	D
NAME	MEZA, MARIA C
STREET ADDRESS	3950 52ND STREET APT. 2B
CITY-ST-ZIP	NEW YORK, NY 11377
TITLE	D
NAME	MEZA, JOSE
STREET ADDRESS	3950 52ND STREET APT. 2B
CITY-ST-ZIP	NEW YORK, NY 11377

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04/10/07-80059-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 04/01/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #