2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076270

Entity Name: VIALOJAR USA, INC.

FILED Mar 08, 2006 Secretary of State

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

1531 NW 182 TERRACE 18339 SW 3RD STREET PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029

Current Mailing Address: New Mailing Address:

1531 NW 182 TERRACE 18339 SW 3RD STREET PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029

FEI Number: 59-3702149 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MORON, ANA M
1531 NW 182 TERRACE
PEMBROKE PINES, FL 33029 US
BENJUMEA, GUILLERMO M
18339 SW 3RD STREET
PEMBROKE PINES, FL 33029 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: GUILLERMO BENJUMEA 03/08/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BENJUMEA, GUILLERMO BENJUMEA, GUILLERMO Name: Name: 1531 NW 182 TERRACE 18339 SW 3RD STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

Name:SANDRA TRILLOS DE BE, NJUMEAName:TRILLOS, SANDRAAddress:1531 NW 182 TERRACEAddress:18339 SW 3RD STREETCity-St-Zip:PEMBROKE PINES, FL 33029City-St-Zip:PEMBROKE PINES, FL 33029

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

 Name:
 MORON, ANA M
 Name:

 Address:
 1531 NW 182 TERRACE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:

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

 Name:
 MORON, SAMUEL
 Name:

 Address:
 1531 NW 182 TERRACE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 City-St-Zip:

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

SIGNATURE: GUILLERMO BENJUMEA D 03/08/2006