2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000021454

Current Principal Place of Business:

Entity Name: HINEIDER USA CORPORATION

FILED Mar 08, 2006 Secretary of State

P.O. BOX 8622 CORAL SPRINGS, FL 3	33075		
Current Mailing Address:		New Mailing Address	::
P.O. BOX 8622 CORAL SPRINGS, FL 33075			
FEI Number: 65-1091756	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
NEIRA. GABRIEL R			

New Principal Place of Business:

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

8333 W MCNAB RD SUITE 101 TAMARAC, FL 33321 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition NEIRA, RICARDO A

NEIRA, GABRIEL Name: Name: P.O. BOX 8622 P.O. BOX 8622 Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33075 City-St-Zip: CORAL SPRINGS, FL 33075

Title: VD Title: VD (X) Change () Addition () Delete Name:

NEIRA, RICARDO A Name: NEIRA. KLAUDIA P.O. BOX 8622 Address: P.O. BOX 8622 Address:

CORAL SPRINGS, FL 33075 CORAL SPRINGS, FL 33075 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition SD SD Name:

NEIRA, KLAUDIA J Name: NEIRA, ALEXANDRA J P.O. BOX 8622 P.O. BOX 8622 Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33075 City-St-Zip: CORAL SPRINGS, FL 33075

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

NEIRA, ALEXANDRA NEIRA, GABRIÉL Name: Name: Address: P.O. BOX 8622 Address: P.O. BOX 8622

City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33075 CORAL SPRINGS, FL 33075

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: RICARDO A NEIRA 03/08/2006