2003 FOR PROFIT CORPORATION

FILED Jan 23, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P01000029087 DOCUMENT # 1. Entity Name 01-23-2003 90104 001 ***150.00 HSD USA, INC. Principal Place of Business Mailing Address 1337 ST. TROPET CIR. 1337 ST. TROPET CIR. WESTON FL 33326 SUITE 2308 HARRIS TOWER WESTON FL 33326 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For 52-2299080 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GANGUZZA, QJOSEPH Street Address (P.O. Box Number is Not Acceptable) 150 W FLAGLER ST MUSEUM TOWER **MIAMI FL 33130** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE Change Addition ·WIJTENBURG, RONALD A NAME NAME Wijtenburcu STREET ADDRESS 1337 ST. TROPEZ CIR. STREET ADDRESS WESTON FL 33326 CITY-ST-ZIP CITY-ST-ZIP TITLE . ☐ Delete TITLE ☐ Change Addition NAME GRANUZZO, CLAUDIO NAME STREET ADDRESS 233 PEACHTREE ST., STE 2308 STREET ADDRESS CITY-ST-7IP ATLANTA GA 30303 CITY-ST-ZIP TITLE ASD Delete. TITLE ☐ Change □ Addition NAME MAZZETTA, TITO NAME STREET ADDRESS 233 PEACHTREE ST., STE 2308 STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30303 CITY-ST-ZIP SD TITLE 💢 Delete ☐ Change ☐ Addition NAME CARRA, ALBERTO STREET ADDRESS VIA OLELLA MECCANICA 16 STREET ADDRESS CITY-ST-ZIP CHIUSA DELLE GINESTBATO IT CITY-ST-ZIP TITLE Detete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 en cute 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

CITY-ST-7iP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

ENBURG 1-20-03

Change

☐ Addition