

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029468

FILED
Feb 26, 2004
Secretary of State

Entity Name: RITCHI U.S.A., INC.

Current Principal Place of Business:

19333 COLLINS AVENUE
SUITE 801
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

19333 COLLINS AVENUE
SUITE 801
SUNNY ISLES, FL 33160

New Mailing Address:

16300 NE 19 AVE
STE C
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-1089680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, FERNANDO
16300 NE 19TH AVE #C
N MIAMI BEACH, FL 33162

Name and Address of New Registered Agent:

SILVA, FERNANDO
16300 NE 19TH AVE
STE C
N MIAMI BEACH, FL 33162

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: FERNANDO SILVA

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VIDAL-BARRETO, ROCIO D
Address: 19333 COLLINS AVENUE SUITE 801
City-St-Zip: SUNNY ISLES, FL 33160

Title: VD () Delete
Name: LECHTER, RICARDO
Address: 19333 COLLINS AVENUE SUITE 801
City-St-Zip: SUNNY ISLES, FL 33160

Title: STD () Delete
Name: MURCIA, MIGUEL M
Address: 11043 N.W. 72ND TERRACE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROCIO VIDAL-BARRETO

PD

02/26/2004

Electronic Signature of Signing Officer or Director

Date