

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064034

FILED
Apr 04, 2008
Secretary of State

Entity Name: ACTION INTERNATIONAL USA, INC.

Current Principal Place of Business:

3854 NORTH UNIVERSITY DR.
SUNRISE, FL 33351

New Principal Place of Business:

1155 WEST 26 STREET
APT # 3
HIALEAH, FL 33010 US

Current Mailing Address:

3854 NORTH UNIVERSITY DR.
SUNRISE, FL 33351

New Mailing Address:

1155 WEST 26 STREET
APT # 3
HIALEAH, FL 33010 US

FEI Number: 20-5923935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELARDE, LINA
7901 SOUTH COLONY CIRCLE #210
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

CRUZ, ARMANDO
1155 WEST 26 STREET
APT # 3
HIALEAH, FL 33010 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: ARMANDO CRUZ

04/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VELARDE, LINA
Address: 7901 SOUTH COLONY CIRCLE #210
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRUZ, ARMANDO
Address: 1155 WEST 26 STREET APT # 3
City-St-Zip: HIALEAH, FL 33010

I hereby certify that the information supplied with this filing does not qualify 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: ARMANDO CRUZ

P

04/04/2008

Electronic Signature of Signing Officer or Director

Date