2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068795

Entity Name: GRACE KENNEDY FINANCIAL SERVICES (USA), INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
6205 BLUE LAGOON DRIVE SUITE 210				3550 SW 148TH AVENUE SUITE 110		
MIAMI, FL	33126 US		MIRAMIR, FL 33027 US			
Current Mailing Address:				New Mailing Address:		
	LAGOON DRIVE			3350 SW 148TH AVENUE SUITE 110 MIRAMAR, FL 33027 US		
SUITE 210 MIAMI, FL	33126 US					
FEI Number:	65-1153691	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired (X)
Name and	Address of Cu	rrent Registered Agent:		Name and	Address o	f New Registered Agent:
CORPORATION COMPANY OF MIAMI 201 S. BISCAYNE BLVD. 1600 MIAMI CENTER (LAD) MIAMI, FL 33131 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:						
	Electronic	Signature of Registered Agent	:			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$		
Title: Name: Address: City-St-Zip:	D () D ORANE, DOUGLA 2E ARCARDIA DE KINGSTON 8, JAN	र		Title: Name: Address: City-St-Zip:	ORANE, DOI 2E ARCARD	
Title: Name: Address: City-St-Zip:	D () C SOLOMON, GRE 10841 NW 12TH FORT LAUDERDA	PLACE		Title: Name: Address: City-St-Zip:	SOLOMON, 5255 NW 95	
Title: Name: Address: City-St-Zip:	D () C ALEXANDER, ED 827 NANDINA DR WESTON, FL 33	WARD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () D WEHBY, DONALI 1 OAKRIDGE DR KINGSTON8, JAM)		Title: Name: Address: City-St-Zip:	WEHBY, DO 1 OAKRIDGE	
Title: Name: Address: City-St-Zip:	D () D BARCLAY, PAULA 4 OLIVER MEWS KINGSTON8, JAM			Title: Name: Address: City-St-Zip:	BARCLAY, F 4 OLIVER M	
Title: Name: Address: City-St-Zip:	OM () C SMITH, PAUL 16337 SW 66TH MIAMI, FL 33193	STREET		Title: Name: Address: City-St-Zip:		() Change () Addition

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: PAUL SMITH

OM

04/20/2005

Electronic Signature of Signing Officer or Director

Date