

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000102933

Entity Name: AVIGREEN (USA), INC.

FILED  
Apr 22, 2004  
Secretary of State

## Current Principal Place of Business:

7842 NW 72ND AVE  
MIAMI, FL 33166

## New Principal Place of Business:

21205 NE 37 AV  
AVENTURA, FL 33180

## Current Mailing Address:

P.O BOX 832137  
MIAMI, FL 332832137

## New Mailing Address:

FEI Number: 85-1150257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COMPLETE CORPORATE SERVICES, INC.  
915 MIDDLE RIVER DR #410  
FORT LAUDERDALE, FL 33304

## Name and Address of New Registered Agent:

COMPLETE CORPORATE SERVICES, INC.  
7730 SW 68 TR  
MIAMI, FL 33143

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: ACHILLES BALLESTAS, PRESIDENT

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: PLAT, ALFREDO J  
Address: 7842 NW 72ND AVE  
City-St-Zip: MIAMI, FL 33166

Title: S ( ) Delete  
Name: SCHULZINGER-DE-PLAT, MARTHA  
Address: 7842 NW 72ND AVE  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PLAT, ALFREDO J  
Address: 21205 NE 37 AV #1710  
City-St-Zip: AVENTURA, FL 33180

Title: S (X) Change ( ) Addition  
Name: SCHULZINGER-DE-PLAT, MARTHA  
Address: 21205 NE 37 AV #1710  
City-St-Zip: AVENTURA, FL 33180

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: ALFREDO PLAT

D

04/22/2004

Electronic Signature of Signing Officer or Director

Date