

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117391

Entity Name: AIVICOM USA, CORP

FILED  
Jan 22, 2007  
Secretary of State

## Current Principal Place of Business:

6345 NW 99TH AVE  
N/A  
DORAL, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

6345 NW 99TH AVE  
N/A  
DORAL, FL 33178

## New Mailing Address:

FEI Number: 01-0591356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LERNOUD, MARIA  
6287 NW 109TH AVE  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

LERNOUD, MARIA  
6345NW 99AVE  
DORAL, FL 33178 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:

01/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COMAS, JUAN J  
Address: 17701 BISCAYNE BLVD 3 FLOOR  
City-St-Zip: MIAMI, FL 33160

Title: VP ( ) Delete  
Name: LERNOUD, MARIA V  
Address: 17701 BISCAYNE BLVD 3 FLOOR  
City-St-Zip: MIAMI, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COMAS, JUAN J  
Address: 6345NW 99AVE  
City-St-Zip: DORAL, FL 33178

Title: VP (X) Change ( ) Addition  
Name: LERNOUD, MARIA V  
Address: 6345NW 99AVE  
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN JOSE COMAS

P

01/22/2007

Electronic Signature of Signing Officer or Director

Date