2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P02000013117

Entity Name: AVALCARD USA, INC.

Current Principal Place of Business:

1111 BRICKELL AVE
STE 1300
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

777 BRICKELL AVE, SUITE 1070
MIAMI, FL 33131

New Mailing Address:

FEI Number: 02-0560311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNEY, JUDITH
777 BRICKELL AVE, SUITE 1070
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Title:	D	( ) Delete
Name:	FERNANDEZ, ALEJANDRA	
Address:	701 BRICKELL AVE, SUITE 1550	
City-St-Zip:	MIAMI, FL 33131	
Title:	D	( ) Delete
Name:	MARIN, LUIS	
Address:	701 BRICKELL AVE, SUITE 1550	
City-St-Zip:	MIAMI, FL 33131	
Title:	D	(X) Delete
Name:	GARCIA, ROBBIE	
Address:	701 BRICKELL AVE, SUITE 1550	
City-St-Zip:	MIAMI, FL 33131	
Title:	DP	(X) Delete
Name:	STAVRINIDES, MICHALIS	
Address:	PO BOX 45-0963	
City-St-Zip:	MIAMI, FL 33245	
Title:	DVS	( ) Delete
Name:	QUANT, ERNESTO J	
Address:	PO BOX 45-0963	
City-St-Zip:	MIAMI, FL 33245	
Title:	DVT	( ) Delete
Name:	GALLEGOS, IVAN	
Address:	PO BOX 45-0963	
City-St-Zip:	MIAMI, FL 33245	

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:	
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: ALEJANDRA FERNANDEZ D 04/27/2005

Electronic Signature of Signing Officer or Director — Date