2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P02000020472

Entity Name: VIAJESERVI U.S.A. INC.

Current Principal Place of Business:

2301 NW 7TH ST
SUITE F
MIAMI, FL 33125

New Principal Place of Business:

2905 NW 9 ST
MIAMI, FL 33125

Current Mailing Address:

2301 NW 7TH ST
SUITE F
MIAMI, FL 33125

New Mailing Address:

2905 NW 9 ST
MIAMI, FL 33125

FEI Number: 75-3037729 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, ARGUETA
2905 NW 9TH ST
MIAMI, FL 33125 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: PD ( ) Delete
Name: LAGOS, IBZAN E
Address: 2905 NW 9 ST
City-St-Zip: MIAMI, FL 33125

Title: SD ( ) Delete
Name: MARTHA, UCANAN
Address: 2905 NW 9 ST
City-St-Zip: MIAMI, FL 33125

Title: TD ( ) Delete
Name: FRIAS, MARTHA
Address: 437 NW 25 CT
City-St-Zip: MIAMI, FL 33125

Title: SD ( ) Delete
Name: MARCELL, ARGUETA
Address: 2905 NW 9 ST
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ARGUETA, NELSON
Address: 2905 NW 9 ST
City-St-Zip: MIAMI, FL 33125

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: IBZAN LAGOS P 04/29/2009

Electronic Signature of Signing Officer or Director — Date