

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108196

FILED
Jan 23, 2004
Secretary of State

Entity Name: FIRST CLASS REPRESENTATIONS USA CORPORATION

Current Principal Place of Business:

815 N.W. 57 AVENUE
SUITE 206
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

100 N. BISCAYNE BLVD.
#2608
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 38-3663063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNSTEIN, JEFFREY A ESQ
100 N. BISCAYNE BLVD.
#2608
MIAMI, FL 33132 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: P S () Delete
Name: SOUED, ALFONSO
Address: 100 N. BISCAYNE BLVD., #2608
City-St-Zip: MIAMI, FL 33132 US

Title: VP T () Delete
Name: BEGO, LEOPOLDO
Address: 100 N. BISCAYNE BLVD. #2608
City-St-Zip: MIAMI, FL 33132 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP T (X) Change () Addition
Name: SOUED, SHOSHANA K
Address: 100 N. BISCAYNE BLVD. #2608
City-St-Zip: MIAMI, FL 33132 US

Title: D () Change (X) Addition
Name: SOUED, ALFONSO
Address: 100 N. BISCAYNE BLVD. #2608
City-St-Zip: MIAMI, FL 33132 US

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: ALFONSO SOUED

P

01/23/2004

Electronic Signature of Signing Officer or Director

Date