

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90036 041 ***150.00

DOCUMENT # P02000128399

1. Entity Name
CAM - USA, INC



Principal Place of Business
**1851 NW 125 AVENUE
SUITE 309
PEMBROKE PINES, FL 33028**

Mailing Address
**1851 NW 125 AVENUE
SUITE 309
PEMBROKE PINES, FL 33028**

50027250



2. Principal Place of Business
1290 WESTON ROAD

3. Mailing Address
1290 WESTON ROAD

Suite, Apt. #, etc.
SUITE 306-A7

Suite, Apt. #, etc.
SUITE 306-A7

City & State
WESTON, FLORIDA

City & State
WESTON, FLORIDA

Zip
33326

Country
USA

Zip
33326

Country
USA

03112005 Chg-P CR2E034 (10/03)

4. FEI Number
22-3885197

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GBS CONSULTANTS
1290 WESTON ROAD STE 306
WESTON, FL 33326**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME PEREZ ROMERO, JORGE
STREET ADDRESS 1290 WESTON ROAD STE 306
CITY-ST-ZIP WESTON, FL 33326

TITLE VD ☐ Delete
NAME PEREZ ROMERO, BERNARDO
STREET ADDRESS 1290 WESTON ROAD STE 306
CITY-ST-ZIP WESTON, FL 33326

TITLE SD ☐ Delete
NAME PERES MATHEUS, MARIA PAOLA
STREET ADDRESS 1290 WESTON ROAD STE 306
CITY-ST-ZIP WESTON, FL 33326

TITLE TD ☐ Delete
NAME PEREZ MATHEUS, VIVIAN
STREET ADDRESS 1290 WESTON ROAD STE 306
CITY-ST-ZIP WESTON, FL 33326

TITLE D ☐ Delete
NAME MACHADO, GUSTAVO A
STREET ADDRESS 1290 WESTON ROAD STE 306
CITY-ST-ZIP WESTON, FL 33326

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vivian Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/13/05
Date

Daytime Phone #