

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132429

Entity Name: CONDOR - USA, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

1717 N BAYSHORE DR
STE 215
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1717 N BAYSHORE DR
STE 215
MIAMI, FL 33132

New Mailing Address:

FEI Number: 13-3477873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEIXOTO, HELOISE
1717 N BAYSHORE DR
STE 215
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 () Delete
Name: ENGEL, HEINZ
Address: 1717 N BAYSHORE DR, STE 215
City-St-Zip: MIAMI, FL 33132

Title: S () Delete
Name: MUHLBAUER, OSMAR
Address: 1717 N BAYSHORE DR, STE 215
City-St-Zip: MIAMI, FL 33132

Title: AV () Delete
Name: HELOISE, REIXOTO
Address: 1717 N BAYSHORE DR, STE 215
City-St-Zip: MIAMI, FL 33132

Title: T () Delete
Name: KLIMMER, MARION
Address: 1717 N BAYSHORE DR, STE 215
City-St-Zip: MIAMI, FL 33132

Title: VPM () Delete
Name: WIGGERS, ALEXANDRE
Address: 1717 N. BAYSHORE DR STE 215
City-St-Zip: MIAMI, FL 33132

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:

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: HELOISE PEIXOTO

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01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date