

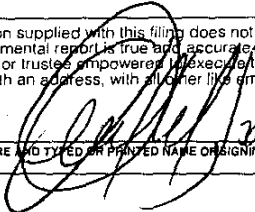


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90029 001 ***150.00

DOCUMENT # P03000006150 1. Entity Name ALAPLANA USA CORP.																																																																																																																																			
Principal Place of Business 1221 BRICKELL AVENUE SUITE 1100 MIAMI, FL 33131			Mailing Address 1221 BRICKELL AVENUE SUITE 1100 MIAMI, FL 33131																																																																																																																																
2. Principal Place of Business 1390 Brickell Ave. Suite, Apt. #, etc. Suite 200		3. Mailing Address 1390 Brickell Ave. Suite, Apt. #, etc. Suite 200																																																																																																																																	
City & State Miami Florida		City & State Miami Florida		4. FEI Number 76-0722791																																																																																																																															
Zip 33131		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																															
6. Name and Address of Current Registered Agent AGRAMUNT, LUIS 1221 BRICKELL AVENUE SUITE 1100 MIAMI, FL 33131																																																																																																																																			
7. Name and Address of New Registered Agent Name Luis Agramunt Street Address (P.O. Box Number is Not Acceptable) 1390 Brickell Ave., Suite 200 City Miami																																																																																																																																			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 5px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 65%; padding: 5px;">D <input type="checkbox"/> Delete</td> <td style="width: 20%; padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 65%; padding: 5px;"></td> <td style="width: 20%; padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">GOZALBO MORENO, JOSE M</td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">1221 BRICKELL AVENUE SUITE 1100</td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td style="padding: 5px;">MIAMI, FL 33131</td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;">D <input type="checkbox"/> Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">GOZALBO MORENO, SANTIAGO</td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">1221 BRICKELL AVENUE SUITE 1100</td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td style="padding: 5px;">MIAMI, FL 33131</td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;"><input type="checkbox"/> Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;"><input type="checkbox"/> Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;"><input type="checkbox"/> Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	D <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	GOZALBO MORENO, JOSE M		NAME			STREET ADDRESS	1221 BRICKELL AVENUE SUITE 1100		STREET ADDRESS			CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP			TITLE	D <input type="checkbox"/> Delete		TITLE			NAME	GOZALBO MORENO, SANTIAGO		NAME			STREET ADDRESS	1221 BRICKELL AVENUE SUITE 1100		STREET ADDRESS			CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	<input type="checkbox"/> Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																																
TITLE	D <input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																														
NAME	GOZALBO MORENO, JOSE M		NAME																																																																																																																																
STREET ADDRESS	1221 BRICKELL AVENUE SUITE 1100		STREET ADDRESS																																																																																																																																
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP																																																																																																																																
TITLE	D <input type="checkbox"/> Delete		TITLE																																																																																																																																
NAME	GOZALBO MORENO, SANTIAGO		NAME																																																																																																																																
STREET ADDRESS	1221 BRICKELL AVENUE SUITE 1100		STREET ADDRESS																																																																																																																																
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP																																																																																																																																
TITLE	<input type="checkbox"/> Delete		TITLE																																																																																																																																
NAME			NAME																																																																																																																																
STREET ADDRESS			STREET ADDRESS																																																																																																																																
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																																
TITLE	<input type="checkbox"/> Delete		TITLE																																																																																																																																
NAME			NAME																																																																																																																																
STREET ADDRESS			STREET ADDRESS																																																																																																																																
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																																
TITLE	<input type="checkbox"/> Delete		TITLE																																																																																																																																
NAME			NAME																																																																																																																																
STREET ADDRESS			STREET ADDRESS																																																																																																																																
CITY-ST-ZIP			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:  JOSE M. GOZALBO MORENO (PR) 02/24/04 (305) 373-5802 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																			