2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 30, 2005 08:00 AM Secretary of State

1. Entity Nam LM SERV	OCUMENT # P03000039333 Entity Name M SERVICES USA, INC. Actipal Place of Business Malling Address			Secretary of State			
	5 AVE., G-310 _ 5	9010 SW 125 AVE., G-310 MIAMI, FL 33186	.	E 188118881 18	4 MINE 1211 4 MILL BETT SMI	:: 20100 11710 1 410 70 1	IIIWW (IIRE ISIIRES IC IRR)
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				03282005 4. FEI Numbe 20-003		CR2E034	
MADRID, I 9010 SW 1 MIAMI, FL	I25 AVE., G-310				NOT W		,
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 tills if applicable (NOTE Pregistered Agent styriature required when reinstating) DATE							
				00 May Be ed to Fees			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	OFFICERS AND DIRE PTD MADRID, LIBARDO 9010 SW 125 AVE., G-310 MIAMI, FL 33186 VPSD ARANGO, LUZ E 9010 SW 125 AVE G-310 MIAMI, FL 33186	CTORS			03/30/05- NOT W	RITE	15 150. 0 0
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP							
12. I hereby of indicated of the corp changed,	pertify that the information supplied with this fon this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an address with entire true.	iling does not qualify for the exer and accurate and that my signat d to execute this report as requir traher ling empowered.			i), Florida Statutes. I it as if made under d is; and that my name		