

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049533

Entity Name: ACD ENTERPRISES USA, CORP.

FILED  
Sep 13, 2007  
Secretary of State

## Current Principal Place of Business:

500 SOUTH POINT DR.,  
# 190  
MIAMI BEACH, FL 33139

## Current Mailing Address:

500 SOUTH POINT DR.  
190  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

300 SOUTH POINT DR.,  
# 2501  
MIAMI BEACH, FL 33139

## New Mailing Address:

300 SOUTH POINT DR.  
#2501  
MIAMI BEACH, FL 33139

FEI Number: 16-1664025

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELGUERCIO, ANGEL CATRIEL  
500 SOTH POINT DR  
190  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

BAILEY, ADELAIDA C  
300 SOUTH POINT DR  
#2501  
MIAMI BEACH, FL 33139 US

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: ADELAIDA BAILEY

09/13/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DEL GUERCIO, ANGEL CATRIEL  
Address: 500 SOUTH POINT DR. # 190  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP (X) Delete  
Name: BAILEY, ADELAIDA C VP  
Address: 500 SOUTH POINT DR # 190  
City-St-Zip: MIAMI BEACH, FL 33154

Title: S (X) Delete  
Name: HERRERA, DULCINEA B  
Address: 500 SOUTH POINT DR # 190  
City-St-Zip: MIAMI BEACH, FL 33154

Title: T (X) Delete  
Name: GENTILE, ROSA B  
Address: 500 SOUTH POINT DR # 190  
City-St-Zip: MIAMI BEACH, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: BAILEY, ADELAIDA C  
Address: 300 SOUTH POINT DR. # 2501  
City-St-Zip: MIAMI BEACH, FL 33139

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 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: ADELAIDA C. BAILEY

PRES

09/13/2007

Electronic Signature of Signing Officer or Director

Date