## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000078516

FILED Feb 04, 2008 Secretary of State

Entity Name: BONANZA USA, CORP.	
Current Principal Place of Business:	New Principal Place of Business:
6966 NW 116 CT DORAL, FL 33178 US	
Current Mailing Address:	New Mailing Address:
6966 NW 116 CT DORAL, FL 33178 US	10773 NW 58TH ST PMB 123 DORAL, FL 33178 US
FEI Number: 76-0742390 FEI Number Applied For ( ) FEI Num	nber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
LA RIVA, HERSON MR 6966 NW 116TH CT DORAL, FL 33178 US	LA RIVA, HERSON MR 10773 NW 58TH ST PMB 123 DORAL, FL 33178 US
The above named entity submits this statement for the purpose of in the State of Florida. $ \begin{tabular}{ll} \hline \end{tabular} $	f changing its registered office or registered agent, or both,
SIGNATURE: HERSON LA RIVA	02/04/2008
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:	Date  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:         P ( ) Delete           Name:         LA RIVA, HERSON A MR.           Address:         6966 NW 116 CT           City-St-Zip:         DORAL, FL 33178 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title:         VP         ( ) Delete           Name:         RUVOLO, MARIA D MS.           Address:         6966 NW 116 CT           City-St-Zip:         DORAL, FL 33178 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title:       GM       ( ) Delete         Name:       LA RIVA, AURYS J MS         Address:       6966 NW 116 CT         City-St-Zip:       DORAL, FL 33178 US	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: HERSON LA RIVA P 02/04/2008