2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2005
Secretary of State

DOCUMENT# P03000090597

Entity Name: CELL SHOP U.S.A, CORP

Current Principal Place of Business:

3265 ALLAMANDA ST
MIAMI, FL 33133

New Principal Place of Business:

1000 PONCE DE LEON BLVD
301
MIAMI, FL 33134

Current Mailing Address:

3265 ALLAMANDA ST
MIAMI, FL 33133

New Mailing Address:

PO BOX 1142
MIAMI, FL 33233

FEI Number: 20-0159900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMOS, ASDRUBAL R SR
1000 PONCE DE LEON BLVD
301
CORAL GABLES, FL 33134 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: DE KNOLL MAGDALENO, YOWINKRE SR
Address: 3265 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete
Name: MAJZOUB, BASSAM SR
Address: 3265 ALLAMANDA ST
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: KNOLL YOWINKRE P 03/03/2005

Electronic Signature of Signing Officer or Director — Date