2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 09, 2007 08:00 AM **DOCUMENT # P03000091004 Secretary of State** C.G. USA CONSTRUCTION CORP. Principal Place of Business Mailing Address 191 NW 97TH AVE APT 502 191 NW 97TH AVE APT 502 MIAMI, FL 33172 MIAMI, FL 33172 02062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1473495 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOMEZ, MARIA C DO NOT WRITE 191 NW 97TH AVE APT 502 MIAMI, FL 33172 IN THIS SPACE 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, typed or printed name of registered agent and title of applicable. (NOTE. Registered Agent signature required when reinstating) U000000629864 9. Election Campaign Financing 02/19/07-80019-001 150.00 \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GOMEZ, MARIA C 191 NW 97TH AVE APT 502 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 TITLE NAME STREET ADDRESS CITY - ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE: maie ela O DEFICER OR MRECTOR

02-07-07

FILED