2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# P03000101232

Entity Name: R. M. O. OF USA, INC

Current Principal Place of Business:

5248 NE 6 AVE.
32-C
OAKLAND PARK, FL 33334

New Principal Place of Business:

11910 RED BRIDGE DR
ORLANDO, FL 32824

Current Mailing Address:

16300 NE 19 AVENUE
STE C
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 20-0230570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GS PROFESSIONAL SOLUTIONS INC
16300 NE 19 AVENUE
SUITE C
NORTH MIAMI BEACH, FL 33162 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: PD ( ) Delete
Name: ZAMBRANO, LEIDY
Address: 5248 NE 6 AVE. SUITE 32-C
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD (X) Delete
Name: ZAMBRANO, LEIDY
Address: 5248 NE 6 AVE. SUITE 32-C
City-St-Zip: OAKLAND PARK, FL 33334

Title: TD (X) Delete
Name: ZAMBRANO, LEIDY
Address: 5248 NE 6 AVE. SUITE 32-C
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ZAMBRANO, LEIDY
Address: 11910 RED BRIDGE DR
City-St-Zip: ORLANDO, FL 32824

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: LEIDY ZAMBRANO PD 04/26/2007

Electronic Signature of Signing Officer or Director — Date