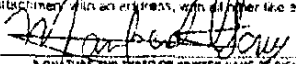


FILED
May 16, 2005 8:00 am
Secretary of State

03-29-2005 90010 029 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P04000028611			
1. Entity Name AVIDEC USA CORP.			
Principal Place of Business 3900 NW 79TH AVENUE SUITE 328 MIAMI, FL 33166		Mailing Address 3900 NW 79TH AVENUE SUITE 328 MIAMI, FL 33166	
2. Principal Place of Business 5311 S.W. 125 AVE City, Apt. #, etc.		3. Mailing Address 5311 S.W. 125 AVE City, Apt. #, etc.	
City & State MIAMI FL Zip 33027		City & State MIAMI FL Zip 33027	
4. FEI Number 20-0741016		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SERRANO, JUAN F 3900 NW 79TH AVENUE SUITE 328 MIAMI, FL 33166		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature Filed or Printed Name of Independent Agent and for 1 year only (P.O. Box Number is Not Acceptable) (Not to be signed by agent or secretary)			
FILE NOW!!! FEE IS \$150.00 After May 17 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete GAZ, MANFRED O 3900 NW 79TH AVENUE MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption applied in Section 139.07(3)(b), Florida Statute. 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 holder of a trust or empowered to execute the report as required by Chapter 607, Florida Statute; and that my name appears in Block 10 or Block 11 if an officer, or on an attachment with an express, with or without the empowered.			
SIGNATURE: 		Date: _____	