2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 13, 2008 08:00 A Secretary of State DOCUMENT # P04000028611 1. Entity Name AVIDEC USA CORP. Principal Place of Business Mailing Address 5311 SW 125 AVE 5311 SW 125 AVE MIRAMAR, FL 33027 MIRAMAR, FL 33027 CR2E034 (11/05) 03052008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0741016 Not Applicable \$8.75 Additional 5. Certificate of Status Desired . Fee Required 6. Name and Address of Current Registered Agent SERRANO, JUAN F DO NOT WRITE 3900 NW 79TH AVENUE **SUITE 328** IN THIS SPACE MIAMI, FL 33166 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE NAME GANZ, MANFRED O STREET ADDRESS 3900 NW 79TH AVENUE MIAMI, FL 33166 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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.

SIGNATURE:

NAME STREET ADDRESS CITY - ST- 7IP

> PIRECTOR BIGHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED