2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029274

Entity Name: INSUMOS USA, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2255 SW 70TH AVE. 2255 SW 70TH AVE. BLDG. #3, UNIT #3 BLDG. #3, UNIT #53 **DAVIE, FL 33317** US DAVIE, FL 33317

Current Mailing Address: New Mailing Address:

905 SW 122ND AVE PEMBROKE PINES, FL 33025

FEI Number: 20-1263804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONIQUE TRONCONE, CPA P.A. 55 NE 5TH AVENUE 501 BOCA RATON, FL 33432 US

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

VΡ

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VΡ

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GONZALES, CAMILO C GONZALES, LUIS C Name: Name:

905 SW 122ND AVE LAS GAVIOTAS Nº 122, OF. 301 Address: Address: City-St-Zip: SURQUILLO, LI PERU City-St-Zip: PEMBROKE PINES, FL 33025

Title: Title: () Delete (X) Change () Addition BALTA, MANUEL J Name: BALTA, MANUEL K Name: LAS GAVIOTAS Nº 122, OF 301 LAS GAVIOTAS Nº 122 Address: Address:

SURQUILLO, LI PERU SURQUILLO, LI PERU City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition TRFA () Delete TRFA

RUBINI, VIRGILIO R RUBINI, VIRGILIO R Name: Name: LAS GAVIOTAS Nº 122, OF 301 LAS GAVIOTAS Nº 122 Address: Address: City-St-Zip: SURQUILLO, LI PERU City-St-Zip: SURQUILLO, LI PERU

Title: SEC () Delete Title: () Change () Addition

FIGARI, ALEJANDRINA I Name: 17823 NW 127TH DRIVE N. Address: JUPITER, FL 33478 US 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.

Ρ SIGNATURE: LUISCAMILO GONZALES 04/27/2007