

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000045142

FILED
Mar 28, 2006
Secretary of State**Entity Name:** ALLISON U.S.A., INC.**Current Principal Place of Business:**6701 NW 7ATH STREET,SUITE 190
BLUE LAGOON BUSINESS PARK
MIAMI, FL 33126**New Principal Place of Business:**6701 NW 7TH STREET,SUITE 190
BLUE LAGOON BUSINESS PARK
MIAMI, FL 33126**Current Mailing Address:**6701 NW 7ATH STREET,SUITE 190
BLUE LAGOON BUSINESS PARK
MIAMI, FL 33126**New Mailing Address:**6701 NW 7TH STREET,SUITE 190
BLUE LAGOON BUSINESS PARK
MIAMI, FL 33126**FEI Number:** 20-0860901**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIAZ-ASPER, PAUL
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: VP () Delete
Name: REANE, SILVIO V
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: VP () Delete
Name: COPPE, GUALTIERO
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: S () Delete
Name: FISCHER, CYNTHIA G
Address: 140 BROADWAY,SUITE 3100
City-St-Zip: NEW YORK, NY 10005

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: DIAZ-ASPER, PAUL
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: VP/D (X) Change () Addition
Name: REANE, SILVIO V
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: VP/D (X) Change () Addition
Name: COPPE, GUALTIERO
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: FOLLI, ROBERTO
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

Title: D () Change (X) Addition
Name: MEVIO, PAOLO
Address: 6701 NW 7TH STREET,SUITE 190
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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: CYNTHIA G. FISHER

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03/28/2006

Electronic Signature of Signing Officer or Director

Date