2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: **以**

Secretary of State DOCUMENT # P04000045200 07-14-2006 90020 028 ***150.00 1. Entity Name VACEL USA INC. Principal Place of Business Mailing Address 40099023 3160 NW 108 TERRACE P.O. BOX 13068 SUNRISE, FL 33351 # 311 MIAMI, FL 33101-9998 2. Principal Place of Business 3. Mailing Address 3134 NW 88Th AUR Ava 3134 NW 88Th Suite, Apt. #, etc. Suite, Apt. #, etc. 07112006 Chg-P CR2E034 (11/05) SUNFISE City & State City & State 4. FEI Number Applied For 20-0836932 Not Applicable ^{Zip} 33351 Country US A \$8.75 Additional 5. Certificate of Status Desired US A Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VASQUEZ, ROLANDO Street Address (P.O. Box Number is Not Acceptable) 3160 NW 108 TERR SUNRISE, FL 33351 3134 NW 88Th Zip Code 3 3 3 5 1 SUNMISE 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. Vosquez SIGNATURE (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition VASQUEZ, ROLANDO NAME NAME 31311 NW 88Th Ame 3160 NW 108 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNRISE, FL 33351 CITY-ST-ZIP SUNPISE, FL 33351 Delete TITLE Addition Change ESTRADA, ANA MARIA NAME NAME STREET ADDRESS 1170 NW 80 AVE# 105 STREET ADDRESS CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-ZIP TITLE Delete TITLE Change Addition VENTURA, LUIS A NAME 9968 SW 146 PLACE STREET ADORESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 it 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.

Rolando Vasquez

FILED Jul 14, 2006 8:00 am

7/11/06 (954) 572-7460