2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005
Secretary of State

DOCUMENT# P04000092228

Entity Name: USA TRADE, INC.

Current Principal Place of Business:

5300 NW 113 PLACE
DORAL, FL 33178

New Principal Place of Business:

4321 SW 126 AVE
MIRAMAR, FL 33027

Current Mailing Address:

5300 NW 113 PLACE
DORAL, FL 33178

New Mailing Address:

4321 SW 126 AVE
MIRAMAR, FL 33027

FEI Number: 20-1265722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TROCCOLI DE ANDRADE, FABIO I
5300 NW 113 PLACE
DORAL, FL 33178 US

Name and Address of New Registered Agent:

ANDRADE, FABIO I
4321 SW 126 AVE
MIRAMAR, FL 33027 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: FABIO I ANDRADE 04/08/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TROCCOLI DE ANDRADE, FABIO I
Address: 5300 NW 113 PLACE
City-St-Zip: DORAL, FL 33178

Title: VD ( ) Delete
Name: ANDRADE, LAISE P
Address: 5300 NW 113 PLACE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ANDRADE, FABIO I
Address: 4321 SW 126 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VD (X) Change ( ) Addition
Name: ANDRADE, LAISE P
Address: 4321 SW 126 AVE
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FABIO I ANDRADE PD 04/08/2005
Electronic Signature of Signing Officer or Director Date