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Mar 18, 2005 8:00 am
Secretary of State


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2005 FOR PROFIT CORPORATION
ANNUAL REPORT

40034036



02042005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000129716			
1. Entity Name DANUSA U.S.A., INC.			
Principal Place of Business 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822		Mailing Address 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822	
2. Principal Place of Business 2540 RUNYON CIRC Suite, Apt. #, etc.		3. Mailing Address 2540 RUNYON CIRC Suite, Apt. #, etc.	
City & State ORLANDO		City & State ORLANDO	
Zip FL		Country 32837	
4. FEI Number 20-1622041		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEREIRA, JURANDIR 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822		7. Name and Address of New Registered Agent Name PEREIRA, JURANDIR Street Address (P.O. Box Number is Not Acceptable) 2540 RUNYON CIRC City ORLANDO FL Zip Code 32837	
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 <u>x Danusa Lengeri</u> DATE <u>03-09-05</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREIRA, JURANDIR 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. PEREIRA, JURANDIR 2540 RUNYON CIRC ORLANDO, FL 32837 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DE SOUSA, SERGIO S 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	J.D. DE SOUSA, SERGIO S. 2540 RUNYON CIRC ORLANDO, FL 32837 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. PIRES, ANTONILDE A 2903 S. SEMORAN BLVD. APT. #188 ORLANDO, FL 32822 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. PIRES, ANTONILDE A 2540 RUNYON CIRC ORLANDO, FL 32837 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>x Danusa Lengeri</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE <u>03-09-05</u> DAYTIME PHONE # <u>407468-5510</u>	