2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P05000003902

Entity Name: SIMILDIET USA, CORP.

Current Principal Place of Business:

2665 LE JEUNE RD STE 804
CORAL GABLES, FL 33134

New Principal Place of Business:

2655 LE JEUNE RD
SUITE 804
CORAL GABLES, FL 33134

Current Mailing Address:

2665 LE JEUNE RD STE 804
CORAL GABLES, FL 33134

New Mailing Address:

2655 LE JEUNE RD STE 804
CORAL GABLES, FL 33134

FEI Number: 20-2168145 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRENTS, JORDI R
2665 LE JEUNE RD STE 804
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

TORRENTS, JORDI R
2655 LE JEUNE RD
SUITE 804
CORAL GABLES, FL 33134 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: JORDI R TORRENTS 04/27/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ENFEDAQUE, MARIA PILAR
Address: CASTELLON PLANA S/N
City-St-Zip: 50007 ZARAGOZA, SPAIN, O

Title: DV ( ) Delete
Name: AZNAR, JOSE CARLOS
Address: CASTELLON PLANA S/N
City-St-Zip: 50007 ZARAGOZA, SPAIN, O

Title: DST ( ) Delete
Name: RUIZ, ALMUDENA
Address: CASTELLON PLANA S/N
City-St-Zip: 50007 ZARAGOZA, SPAIN,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ALMUDENA RUIZ DST 04/27/2006
Electronic Signature of Signing Officer or Director Date