2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064224

Title:

Name:

Address:

City-St-Zip:

Entity Name: SPECTRA SERVICES USA CORPORATION

FILED Jan 25, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
4300 BISCAYNE BOULEVARD # 204 MIAMI, FL 33137				OAKBROOK TOWER 2451, MCMULLEN BOOTH ROAD # 255 CLEARWATER, FL 33759		
Current Mailing Address:				New Mailing Address:		
		RO P.A. ARD, SUITE 204				
FEI Number:	20-2777009	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
4300 BISC SUITE 204	ES, MARIA C AYNE BOULEV 33137 US	ARD, SUITE 204				
	named entity so e of Florida.	ubmits this statement for the pu	rpose o	f changing it	ts registere	ed office or registered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	GIL-MARTINEZ,	CP. BIARRITZ, PISO 1 OF. 1-28		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	MIJARES, LUIŚ	Delete CP. BIARRITZ, PISO 1 OF. 1-28 /ENEZUELA VZ		Title: Name: Address: City-St-Zip:	AV VALENO	(X) Change () Addition GIL, MISLEIDY CIA CCP. BIARRITZ, PISO 1 OF. 1-28 CA VENEZUELA VZ
Title: Name: Address: City-St-Zip:	MENA, JOSE	Delete CP. BIARRITZ, PISO 1 OF. 1-28 /ENEZUELA VZ		Title: Name: Address: City-St-Zip:		(X) Change () Addition 'ALDO CIA CCP. BIARRITZ, PISO 1 OF. 1-28 . CA VENEZUELA VZ

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: TOMAS GIL P 01/25/2007

() Delete

HIALEAH GARDEN, FL 33012 US

1000 NW 80 COURT BLD #3 APT. 2459

FONTE, ORESTE

() Change () Addition