2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# P05000064224

Entity Name: SPECTRA SERVICES USA CORPORATION

Current Principal Place of Business:

OAKBROOK TOWER 2451, MCMULLEN BOOTH ROAD
255
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

C/O CIFUENTES-MARRERO P.A.
4300 BISCAYNE BOULEVARD, SUITE 204
MIAMI, FL 33137

New Mailing Address:

FEI Number: 20-2777009 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIFUENTES, MARIA C
4300 BISCAYNE BOULEVARD, SUITE 204
SUITE 204
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GIL-MARTINEZ, TOMAS
Address: AV VALENCIA CCP. BIARRITZ, PISO 1 OF. 1-28
City-St-Zip: VALENCIA, CA VENEZUELA VZ

Title: VP ( ) Delete
Name: CANO DE GIL, MISLEIDY
Address: AV VALENCIA CCP. BIARRITZ, PISO 1 OF. 1-28
City-St-Zip: VALENCIA, CA VENEZUELA VZ

Title: T ( ) Delete
Name: LEO, OSWALDO
Address: AV VALENCIA CCP. BIARRITZ, PISO 1 OF. 1-28
City-St-Zip: VALENCIA, CA VENEZUELA VZ

Title: S ( ) Delete
Name: FONTE, ORESTE
Address: 1000 NW 80 COURT BLD #3 APT. 2459
City-St-Zip: HIALEAH GARDEN, FL 33012 US

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: TOMAS GIL P 04/14/2008

Electronic Signature of Signing Officer or Director — Date