2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 02-05-2007 90079 004 ***150.00 DOCUMENT # P05000068347 1. Entity Name TRIBU USA INC. Principal Place of Business Mailing Address 40009373 3115 58TH STREET SW 3115 58TH STREET SW NAPLES, FL 34116 NAPLES, FL 34116 01302007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 47-0954738 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RIEGO-DE-DIOS, HEATHCLIFF DO NOT WRITE 3115 58TH STREET SW NAPLES, FL:34116 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be П After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS **PSTD** TITLE NAME RIEGO-DE-RIOS, HEATHCLIFF 3115 58TH STREET SW STREET ADDRESS CITY - ST - ZIP NAPLES, FL 34116 TITLE SISI, PERFECTO JOSE NAME STREET ADDRESS 15975 ARBOR VIEW BLVD #620 CITY-ST-ZIP NAPLES, FL 34110 TITLE LUENGO, JASON NAME STREET ADDRESS 15975 ARBOR VIEW BLVD #620 DO NOT WRITE CITY-ST-ZIP NAPLES, FL 34110 IN THIS SPACE RIEGO-DE-RIOS, HEATHCLIFF NAME STREET ADDRESS 3115 58TH STREET SW CITY-ST-ZIP NAPLES, FL 34116 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing closs not qualify for the exemptions contained 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 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 fustee epochage to execute this partial as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

of the corporation or the received changed, or on an attachment

SIGNATURE:

FILED Feb 05, 2007 8:00 am

239-2984436

Daytime Phone #

01/30/07

Date