2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P05000073496

Entity Name: DITOYS USA CORP.

Current Principal Place of Business:

8600 NW 17 STREET
SUITE 160
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

8600 NW 17 STREET
160
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-2885245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCORT, DIEGO
750 SW 174 TERRACE
PEMBROKE PINES, FL 33029 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: D ( ) Delete
Name: SORT, DIEGO
Address: 750 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: BIGIO, MARIA M
Address: 750 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D ( ) Delete
Name: DAGER, RICARDO
Address: 10759 NW 70 LANE
City-St-Zip: DORAL, FL 33178

Title: D ( ) Delete
Name: DAGER, ELIZABETH
Address: 10759 NW 70 LANE
City-St-Zip: DORAL, FL 33126

Title: D ( ) Delete
Name: WEISKIND, GUSTAVO E
Address: 8600 NW 17 STREET
City-St-Zip: DORAL, FL 33126

Title: D (X) Delete
Name: SIECKZA, JOSE E
Address: 8600 NW 17 STREET
City-St-Zip: DORAL, FL 33126 AR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCORT, DIEGO
Address: 750 SW 174 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

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

Title: D (X) Change ( ) Addition
Name: LAPIDUS, RUBEN
Address: 8600 NW 17 STREET SUITE 160
City-St-Zip: DORAL, FL 33126

Title: D (X) Change ( ) Addition
Name: SIECKZA, JOSE E
Address: 8600 NW 17 STEET SUITE 160
City-St-Zip: DORAL, FL 33126

Title: D (X) Change ( ) Addition
Name: WEISKIND, GUSTAVO E
Address: 8600 NW 17 STREET SUITE 160
City-St-Zip: DORAL, FL 33126

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: MARIA M BIGIO D 04/29/2008

Electronic Signature of Signing Officer or Director Date