2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000106127

1. Entity Name

ANDINO ELECTRIC CORP. OF USA



FILED
May 02, 2007 08:00 A
Secretary of State

Principal Place of Business

Mailing Address

14331 SW 139 CT MIAMI, FL 33186 14331 SW 139 CT MIAMI, FL 33186



04182007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3236781

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDINO, MARLENE D 14331 SW 139 CT MIAMI, FL 33186

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8. The above the obligat	enamed entity submits this statement for the pitions of registered agent.	ourpose of changing its registered office of	r registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	Il applicable. (NOTE: Registered Agent signa	ure required when reinstating)	DATE
FÎL After M	E NOW!!!_FEE.IS.\$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
.10.	OFFICERS AND DIREC	CTORS	· · · · · · · · · · · · · · · · · · ·	
TITLE TNAME STREET ADDRESS CHY-ST-ZIP	PD ANDINO, MARLENE D 14331 SW 139 CT MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ANDINO III, ALBERTO J 14331 SW 139 CT MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DO N	NOT WRITE
TITLE NAME STREET ADDRESS CITY-S1-ZIP			IN T	HIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP				000000756609 05/23/07-80039-009 150.0
NAME STREET ADDRESS				· ·

12. I hereby certify that the information supplied with this filing does 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an arrivers, with all other like empowered.

SIGNATURE:

AJURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/07

*9*05-278-9484

Daylime Phone #