2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153342

Entity Name: PS GROUP USA CORP.

FILED Mar 05, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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6345 COLLINS AVENUE 410 1/2 NE 2ND ST

SUITE 542 US HALLANDALE, FL 33009

MIAMI BEACH, FL 33141

New Mailing Address: Current Mailing Address:

2520 SW 22ND. ST. 2520 SW 22ND ST SUITE 2-021 SUITE 2-021

MIAMI, FL 33145 MIAMI, FL 33145 US

FEI Number: 86-1151479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STARK, PATRICIO STARK, PATRICIO E MR 6345 COLLINS AVENUE 410 1/2 NE 2ND ST SUITE 542 HALLANDALE, FL 33009 US

MIAMI BEACH, FL 33141 US

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: PATRICIO STARK 03/05/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

STARK, PATRICIO STARK, PATRICIO E MR Name: Name: 6345 COLLINS AVENUE SUITE 542 Address: 410 1/2 NE 2ND ST Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: HALLANDALE, FL 33009 US

Title: () Delete Title: () Change (X) Addition Name: Name:

SIERRA, JOSE M MR 2520 SW 22ND ST - SUITE 2-021 Address: Address:

MIAMI, FL 33145 US

City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete Name: Name:

HORTA, FELIPE F MR 2520 SW 22ND ST - SUITE 2-021 Address Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33145 US

Title: () Delete Title: () Change (X) Addition OLMEDO, MIGUEL A MR Name: Name:

Address: 2520 SW 22ND ST - SUITE 2-021

City-St-Zip: City-St-Zip: MIAMI, FL 33145 US

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.

Ρ SIGNATURE: PATRICIO E. STARK 03/05/2007