

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000054184

FILED
Apr 30, 2007
Secretary of State

Entity Name: BANIF FORFAITING (USA), INC.

Current Principal Place of Business:

1110 BRICKELL AVE SUITE 1801
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AVE SUITE 1801
MIAMI, FL 33131

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NS CORPORATE SERVICES INC
1110 BRICKELL AVE SUITE 310
MIAMI, FL 33131 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: DE ALMEIDA CAPELA, SERGIO
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: DECASO, EDWARD
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: CAMILO, WILSON
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: RODRIGUES, ANTONIO JULIO M
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: LOPES, VALDEMAR
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

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:

Title: D (X) Change () Addition
Name: ALMEIDA, CARLOS DAVID D
Address: 1110 BRICKELL AVE SUITE 1801
City-St-Zip: MIAMI, FL 33131

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: ED DECASO

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date