2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# P06000108296

Entity Name: MITCHELL GROUP USA, INC

Current Principal Place of Business:

905 BRICKELL BAY DR, TOWER II
1929
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

905 BRICKELL BAY DR, TOWER II
1929
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-4603097 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUSSAIN, ANTHONY S
905 BRICKELL BAY DR, TOWER II
1929
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: P ( ) Delete
Name: HUSSAIN, ANTHONY S
Address: 6355 SW 69TH AVE
City-St-Zip: MIAMI, FL 33131 US

Title: VP ( ) Delete
Name: HUSSAIN, ANTHONY S
Address: 6355 SW 69TH AVE
City-St-Zip: MIAMI, FL 33131 US

Title: SEC ( ) Delete
Name: ANTHONY, HUSSAIN S
Address: 6355 SW 69TH AVE
City-St-Zip: MIAMI, FL 33131 US

Title: TRE ( ) Delete
Name: SOFRONIA, OVIDIU
Address: 1901 BRICKELL AVE, #B2302
City-St-Zip: MIAMI, FL 33129 US

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:

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.

SIGNATURE: ANTHONY HUSSAIN P 04/23/2007

Electronic Signature of Signing Officer or Director — Date