

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000140299

FILED
May 15, 2007
Secretary of State**Entity Name:** INMOPTIONS USA, CORPORATION**Current Principal Place of Business:**80 SW 8 ST
2025
MIAMI, FL 33130**New Principal Place of Business:****Current Mailing Address:**80 SW 8 ST
2025
MIAMI, FL 33130**New Mailing Address:****FEI Number:** 06-1804272 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
ST 200
MIAMI, FL 33126 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NOVAL ARIAS, JULIO
Address: 80 SW 8 ST STE 2025
City-St-Zip: MIAMI, FL 33130

Title: D () Delete
Name: NOVAL ARIAS, TERESA
Address: 80 SW 8 ST STE 2025
City-St-Zip: MIAMI, FL 33130

Title: D () Delete
Name: NOVAL ARIAS, MARIA
Address: 80 SW 8 ST STE 2025
City-St-Zip: MIAMI, FL 33130

Title: G (X) Delete
Name: BABINSKA, ANETA
Address: 80 SW 8 ST STE 2025
City-St-Zip: MIAMI, FL 33130

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 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: NOVAL ARIAS TERESA

D

05/15/2007

Electronic Signature of Signing Officer or Director

Date