2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000153006

PERLMAN, BRUCE

HOLLYWOOD, FL 33312

3200 SW 42 ST.

Name:

Address:

City-St-Zip:

FILED Jul 16, 2007 Secretary of State

| Entity Nar | ma: RPANIDS | MART USA OF FLORIDA, INC. | | , | |
|---|--|-----------------------------------|---|---|--|
| Littly Nu | iic. DIVANDO | WART OOA OF TEORIDA, INO. | | | |
| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
| 3200 SW 4 HOLLYWO | 12 ST. DOD, FL 3331: | 2 | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 3200 SW 4 HOLLYWO | 12 ST. DOD, FL 3331: | 2 | | | |
| FEI Number: | : 20-8038781 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| ALVAREZ, TAMATHA 7975 NW 154 STREET SUITE 230 MIAMI LAKES, FL 33016 US | | | ALVAREZ, TAMATHA 2500 WESTON ROAD, WESTON, FL 33331 | 2500 WESTON ROAD, SUITE 213 | |
| | named entity s e of Florida. | submits this statement for the pu | rpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | 07/16/2007 | |
| | Electror | ic Signature of Registered Agen | t | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | D () PERLMAN, RO 3200 SW 42 ST HOLLYWOOD, | Г. | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D () PERLMAN, SH/ 3200 SW 42 ST HOLLYWOOD, | Г. | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D () PERLMAN, MIC 3200 SW 42 ST HOLLYWOOD, | Г. | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: | D () |) Delete | Title: (|) Change ()Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL PERLMAN D 07/16/2007