

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000061160

Entity Name: HEIGA USA, INC.

FILED  
Mar 24, 2005  
Secretary of State

## Current Principal Place of Business:

6566 N.W. 13 CT.  
PLANTATION, FL 33313 US

## New Principal Place of Business:

## Current Mailing Address:

6566 N.W. 13 CT.  
PLANTATION, FL 33313 US

## New Mailing Address:

FEI Number: 65-0434677      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, ADRIAN D MANAGER  
6566 N.W. 13 CT.  
PLANTATION, FL 33313 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: PT ( ) Delete  
Name: IMBERNON, JOSE M  
Address: 6566 N.W. 13 CT.  
City-St-Zip: PLANTATION, FL 33313 US

Title: VS ( ) Delete  
Name: IMBERNON, JOSE G  
Address: 6566 N.W. 13 CT.  
City-St-Zip: PLANTATION, FL 33313 US

Title: D ( ) Delete  
Name: IMBERNON, MALURY  
Address: 6566 NW 13 CT  
City-St-Zip: PLANTATION, FL 33313 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MALURY IMBERNON

D

03/24/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date