2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000085199

Entity Name: ARCOR U.S.A. INC.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
550 BILTMORE WAY					
PH II-A CORAL GABLES, FL 33134 US					
Current Mailing Address:			New Mailing Address:		
550 BILTMORE WAY					
PH II-A CORAL GABLES, FL 33134 US					
FEI Number: 65-0453647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
STEWART, ROBERT W P.A. 18001 OLD CUTLER ROAD, SUITE 600 MIAMI, FL 33157 US					
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 Si	gnature of Registered Agent			Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () Delec LIMONTI, SERGIO A 550 BILTMORE WAY MIAMI, FL 33134 US	′ PH II-A	Title: Name: Address: City-St-Zip:	PD (X) RODRIGUEZ, JU 550 BILTMORE MIAMI, FL 3313	WAY PH II-A
Title: Name: Address: City-St-Zip:	VD () Dele PAGANI, MARIO E 550 BILTMORE WAY MIAMI, FL 33134 US	′ PH II-A	Title: Name: Address: City-St-Zip:	()	Change ()Addition
Title: Name: Address: City-St-Zip:	VD () Dele MARTIN, VICTOR D 550 BILTMORE WAY MIAMI, FL 33134 US	′ PH II-A	Title: Name: Address: City-St-Zip:	()(Change ()Addition
Title: Name: Address: City-St-Zip:	S () Dele MOORE, EDUARDO 550 BILTMORE WAY MIAMI, FL 33134 US	′ PLAZA	Title: Name: Address: City-St-Zip:	() (Change()Addition
Title: Name: Address: City-St-Zip:	VD () Dele PAGANI, FULVIO R 550 BILTMORE WAY MIAMI, FL 33134 US	′ PH II-A	Title: Name: Address: City-St-Zip:	()(Change()Addition
Title: Name: Address: City-St-Zip:	T () Delection ()	G ′ PH II-A	Title: Name: Address: City-St-Zip:	() (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.					

SIGNATURE: EDUARDO MOORE S 03/12/2009