2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P97000010672

Entity Name: PAX VILLA USA, INC.

Current Principal Place of Business:

1941 W. OAKLAND PARK BOULEVARD
OAKLAND PARK, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

1941 W. OAKLAND PARK BOULEVARD
OAKLAND PARK, FL 33311 US

New Mailing Address:

FEI Number: 65-0750770 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAINT AMAND, SANDRA D
1941 W. OAKLAND PARK
OAKLAND PARK, FL 33311 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: D ( ) Delete
Name: ST. AMAND, FRED J JR
Address: 2429 NW 184 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: P/D ( ) Delete
Name: ST. AMAND, SANDRA D
Address: 1941 W. OAKLAND PARK BOULEVARD
City-St-Zip: OAKLAND PARK, FL 33311

Title: D/S ( ) Delete
Name: ST. AMAND, JESSICA L
Address: 54 NE 54TH STREET
City-St-Zip: MIAMI, FL 33137

Title: DCEO ( ) Delete
Name: ST AMAND, FRED J SR
Address: 621 SOUTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: BA ( ) Delete
Name: RODRIQUEZ, CLIFTON H
Address: 3146 NW 68TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

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:

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: SANDRA ST. AMAND MS. 04/30/2008

Electronic Signature of Signing Officer or Director — Date