## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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DOCUMENT # P97000087011					ļ					
1. Entity Name SEGADUANCA U.S.A., CORP.						. L~1				
GEORDOMION O.O.A., CORF.					08 OCT 27 PH 2: 24					
				1859	ļ					
Principal Place of Business Mailing Address				i		LUAHASS:	( C. S.)	(1) ( <u>.</u>		
2912 NW 72-AVE 2912 NW 72-AVE   MIAMLET 33122 US MIAMLET 33122 US						LLAHASS	EE, FLU	KIJA		
MIAMI PL 3	3122 03	MIAMLET 33122 US		i						
2. Principal Place of Business - No P.O. Box # 3. Malling Address 2818 NW 72 DW 2818 NW 72 D						1840   1854 <b>  6</b> 644 <b>  66</b> 40   1				
Suite, Apt. #, etc. Suite, Apt. #, etc.					10222008	Chg-P	CBSEO	34 (12/06)		
City & State					4, FEI Numb 65-078	•			plied For t Applicable	
Zip Country_ Zip Count			ountry					\$8.75 Add		
			AZU	Fee Required						
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
GUASCHI DE CHACIN SILVIA										
11212 NW 73 ST				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33178					······	<u></u>				
			City			<del></del>	FL	Zip Code	<del></del>	
9 The above	accord antity outprite this statement for	r the purpose of changing its region	stored affice or	register	ad appart or ba	th in the State of E		omilies with	and account	
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
0 Flortion Compaign Financian #F 80										
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10,	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OF	FICEDS AND	DIRECTOR	P INI 44	
TITLE	D OFFICERS AND	3/	TITLE	<u>~</u>	AUDITIONS	CHANGES TO OF	FICENS AND	Change	Addition	
NAME	CHACIN, ALBERTO J			CHIX	and Albe	PLTO 5.				
STREET ADDRESS	2912 NW 72 AVE		STREET ADDRESS	281	B NU 7:	s are				
CITY-ST-ZIP*	MIAMI, FL 33122 MGR		CITY - ST - ZIP		m) FL 3	53122		Change	☐ Addition	
TITLE NAME	DE CHACIN, SILVIA GUACHI		TITLE NAME	25 MG1	CHACM	J Siwia G	ጋይ ይር	L Change	Aug:tion	
STREET ADDRESS	2912 NW 72 AVE	j	STREET ADDRESS	281	B NW 3	5V42		•••		
CITY-ST-ZIP	MIAMI, FL 33122			MD	<u>rù Fl</u>	33122				
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STREET ADDRESS			STREET ADDRESS		10/2	<mark>00137</mark> 7/080106	ĭ020	**7Ü.1	00	
CITY-ST-ZIP			CITY-ST-ZIP							
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NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY+ST-ZIP							
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME		Donate	NAME							
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP	cortify that the information are all and aridal	this filing does not swellful for the	CITY-ST-ZIP		d in Chantar 44	0 Florida Cratias	I 6 orthon	ifu there at a !	oformation.	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment of the statutes, with all other like empowered.										
changed, or on an attachment with an address, with all other like empowered.										
CICHATURE WITH MARKET PURCH IN AS 2008 (200 2002)										
SIGNATURE: / LIGHT ALBERTO CHACIN 10, 32, 208 (305) 5936833										

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR