## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033517

Entity Name: U.S.A. FUND MIAMI CORPORATION

FILED Apr 18, 2006 Secretary of State

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Current P	rincipal Plac	e of Business:		New Principal Place	of Business:
150 ALHA MIAMI, FL	MBRACR, SU 33134	ITE 800		150 ALHAMBRA CIR SUITE 800 CORAL GABLES, FL	
Current M	lailing Addre	ss:		New Mailing Address	ss:
150 ALHAI SUITE 208 MIAMI, FL		ITE 800		150 ALHAMBRA CIR SUITE 800 CORAL GABLES, FL	
FEI Number	: 65-0929635	FEI Number Applied For ( )	FEI Nur	nber Not Applicable ( )	Certificate of Status Desired (X)
Name and	Address of	Current Registered Agent:		Name and Address	of New Registered Agent:
	BRA CIRCLE			S&K PROPERTY MA 150 ALHABRA CIRCI SUITE 800 MIAMI, FL 33134 US	LE
	e named entity e of Florida.	submits this statement for the p	ourpose o	f changing its registere	ed office or registered agent, or both,
SIGNATU	RE: LIDIA CA	RTAYA			04/18/2006
		nic Signature of Registered Age	ent		Date
Election Car	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	CTORS:		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	CONRADI, AX	A CR, SUITE 800		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	KUCZURBA, D	A CR, SUITE 800		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	STOCK, VERE	A CR, SUITE 800		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	HERNANDEZ,	) Delete FRANK A CR, SUITE 800		Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: DIRK KUCZURBA P 04/18/2006
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CORAL GABLES, FL 33134

City-St-Zip: