2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000044144

Entity Name: COMMERCIAL CAPITAL USA, INC.

FILED May 09, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5328 TROUBLE CREEK 5328 TROUBLE CREEK

2ND FLOOR NEW PORT RICHEY, FL 34652 US

NEW PORT RICHEY, FL 34652 US

Current Mailing Address: New Mailing Address:

5328 TROUBLE CREEK 5328 TROUBLE CREEK

2ND FLOOR NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3579210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RYZOWICS, MICHELLE M

ASHFIELD, ALAN

1915 FIREFERN CRT

5328 TROUBLE CREEK

TRINITY, FL 34655 US NEW PORT RICHEY, FL 34652 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: ALAN ASHFIELD 05/09/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: PVST (X) Change () Addition

 Name:
 RYZOWICS, MICHELLE M
 Name:
 ASHFIELD, ALAN

 Address:
 1915 FIREFERN CT
 Address:
 5328 TROUBLE CREEK

 City-St-Zip:
 TRINITY, FL 34655
 City-St-Zip:
 NEW PORT RICHEY, FL 34652

Title: D (X) Delete Title: () Change () Addition

 Name:
 ASHFIELD, ALAN P
 Name:

 Address:
 7037 CHETEK DR., #105
 Address:

 City-St-Zip:
 TRINITY, FL 34655
 City-St-Zip:

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.

SIGNATURE: ALAN ASHFIELD P 05/09/2006