

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000088661

FILED
Apr 30, 2006
Secretary of State

Entity Name: INVERTELCO USA ENTERPRISES, INC.

Current Principal Place of Business:

10940 CEDAR LANE
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

5803 SW 112 WAY
COOPER CITY, FL 33330 US

Current Mailing Address:

10940 CEDAR LANE
PEMBROKE PINES, FL 33026 US

New Mailing Address:

5803 SW 112 WAY
COOPER CITY, FL 33330 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAMIREZ, LEON D
10940 CEDAR LANE
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

RAMIREZ, LEON D
5803 SW 112 WAY
COOPER CITY, FL 33330 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:

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMIREZ, LEON D
Address: 10940 CEDAR LN
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPTS () Delete
Name: RAIGOZA, ANGELA M
Address: 10940 CEDAR LN
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: GARCES, JAIRO
Address: 10940 CEDAR LN
City-St-Zip: PEMBROKE PINES, FL 33026

Title: S (X) Delete
Name: RAMIREZ, RAQUEL A
Address: 10940 CEDAR LN
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMIREZ, LEON D
Address: 5803 SW 112 WAY
City-St-Zip: COOPER CITY, FL 33330

Title: VPTS (X) Change () Addition
Name: RAIGOZA, ANGELA M
Address: 5803 SW 112 WAY
City-St-Zip: COOPER CITY, FL 33330

Title: D (X) Change () Addition
Name: RAMIREZ, RAQUEL A
Address: 5803 SW 112 WAY
City-St-Zip: COOPER CITY, FL 33330

Title: () Change () Addition
Name:
Address:
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: LEON D. RAMIREZ

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date