## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P99000001100

Entity Name: CREDIT FIX U.S.A., INC.

FILED Jun 13, 2007 Secretary of State

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

8500 SW 8TH STREET SUITE 204 MIAMI, FL 33144

**Current Mailing Address: New Mailing Address:** 

8500 SW 8TH STREET SUITE 204 MIAMI, FL 33144

FEI Number: 65-0887003 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:

BARBARA, ARNOLD R 8500 SW 8TH STREET SUITE 204 MIAMI, FL 33144 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: **PSCD** (X) Change ( ) Addition BARBARA, ARNOLD R Name: Name: BARBARA, ARNOLD R

8500 SW 8TH STREET #204 8500 SW 8TH STREET #204 Address: Address:

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33144

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

Name: BARBARA, MINERVA Name: 8500 SW 8TH STREET #204 Address: Address: MIAMI, FL 33144 City-St-Zip: 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: ARNOLD R. BARBARA SR. **PSCD** 06/13/2007