

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012619

Entity Name: TRAX USA CORP.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE  
SUITE 500  
COCONUT GROVE, FL 331335448 US

## New Principal Place of Business:

## Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE  
SUITE 500  
COCONUT GROVE, FL 331335448 US

## New Mailing Address:

FEI Number: 65-0893518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENRY, PARRA  
2665 SOUTH BAYSHORE DRIVE  
SUITE 500  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: PARRA, HENRY  
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 500  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: S ( ) Delete  
Name: ESCOBAR, LIDIA  
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 500  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: P ( ) Delete  
Name: ALMEIDA, JOSE A  
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 500  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ESCOBAR, LIDIA  
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 500  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: REED, CHRISTOPHER I  
Address: 7 KINGS COURT, HARWOOD ROAD  
City-St-Zip: HORSHAM, WS RH13 5UR EN

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: HENRY PARRA

VP

04/19/2006

Electronic Signature of Signing Officer or Director

Date