

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042248

Entity Name: ARVORE DA VIDA USA, CORP.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

8416 S.W. 208 STREET
MIAMI, FL 33189

New Principal Place of Business:

6601 LIONS RD. E5
COCONUT CREEK, FL 33073

Current Mailing Address:

13935 NW 1ST AVE
MIAMI, FL 33168

New Mailing Address:

FEI Number: 65-0918454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAS DA SILVA, EMERSON
8416 S.W. 208 STREET
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

DIAS DA SILVA, EMERSON
6601 LIONS RD. E5
COCONUT CREEK, FL 33073 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: SANDRA D PEREZ

05/01/2007

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: PD () Delete
Name: DIAS DA SILVA, EMERSON
Address: 1445 MARTINIQUE CT. #6005
City-St-Zip: WESTON, FL 33326

Title: VD () Delete
Name: DE SOUZA DIAS, MIRIAN
Address: 1445 MARTINIQUE CT. #6005
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: DIAS DE SILVA, ISABELLA
Address: 1445 MARTINIQUE CT. #6005
City-St-Zip: WESTON, FL 33326

Title: TD () Delete
Name: DIAS DE SILVA, JONATAS
Address: 1445 MARTINIQUE CT. #6005
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: EMERSON DIAS DA SILVA

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date