

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21827

FILED
Apr 01, 2005
Secretary of State

Entity Name: GAMMA CARRIERS (USA), INC.

Current Principal Place of Business:

C/O PRESIDENT
2511 N.W. 72ND AVE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

PRESIDENT
2511 N.W. 72ND AVE
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 65-0257415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM INC.
1202 HAYS STREET, STE. 105
TALLAHASSEE, FL 32301 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: P () Delete
Name: MAZZANTI, ALESSIO
Address: 2511 NW 72ND AVE.
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: PEARL, FRANK
Address: 2511 NW 72ND AVE.
City-St-Zip: MIAMI, FL 33122

Title: D (X) Delete
Name: PIQUERO, FRANSISCO
Address: 2511 NW 72ND AVE.
City-St-Zip: MIAMI, FL 33122 US

Title: D () Delete
Name: GOMEZ, JUAN P
Address: 2511 NW 72ND AVE
City-St-Zip: MIAMI, FL 33122 US

Title: S () Delete
Name: CICERARO, JUAN
Address: 2511 NW 72 AVENUE
City-St-Zip: MIAMI, FL 33122 US

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:

Title: S (X) Change () Addition
Name: MERZ, KATHERINE
Address: 2511 NW 72 AVENUE
City-St-Zip: MIAMI, FL 33122 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALESSIO MAZZANTI

P

04/01/2005

Electronic Signature of Signing Officer or Director

_____ Date