2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 30, 2005
Secretary of State

DOCUMENT# S21827

Entity Name: GAMMA CARRIERS (USA), INC.

Current Principal Place of Business:

C/O PRESIDENT
8206 NW 14 STREET
MIAMI, FL 33126 US

New Principal Place of Business:

C/O JUAN PABLO GOMEZ
8206 NW 14 STREET
MIAMI, FL 33126 US

Current Mailing Address:

PRESIDENT
8206 NW 14 STREET
MIAMI, FL 33126 US

New Mailing Address:

C/O JUAN PABLO GOMEZ
8206 NW 14 STREET
MIAMI, FL 33126 US

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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KAPITANY, JANOS
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: PEARL, FRANK
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: GOMEZ, JUAN P
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126 US

Title: S (X) Delete
Name: MERZ, KATHERINE
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126 US

Title: D (X) Delete
Name: JUNGUITO, ROBERTO
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOMEZ, JUAN P
Address: 8206 NW 14 STREET
City-St-Zip: MIAMI, FL 33126

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 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: JUAN PABLO GOMEZ D 11/30/2005

Electronic Signature of Signing Officer or Director — Date