

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 374974

FILED
Jan 26, 2005
Secretary of State

Entity Name: UNITED STATES WARRANTY CORP.

Current Principal Place of Business:

22 NE 22ND AVE
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

22 NE 22ND AVE
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1651866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, WILLIAM F. III
22 NE 22ND AVE
POMPANO BCH., FL 33062 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: SD () Delete
Name: SILVERMAN, LORI A.,
Address: 2221 CYPRESS ISLAND DR
City-St-Zip: POMPANO BCH, FL

Title: VD () Delete
Name: MACEK, MARK A.,
Address: 2700 SE 6 ST
City-St-Zip: POMPANO BCH, FL

Title: PD () Delete
Name: DAVIS, WILLIAM F III
Address: 22 NE 22 AVE
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: SMOLICH, JAMES J
Address: 318 NW 120TH DR
City-St-Zip: POMPANO BEACH, FL 33071

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 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: RIA GANPATH, COMPLIANCE OFFICER

N/A

01/26/2005

Electronic Signature of Signing Officer or Director

Date