2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005
Secretary of State

DOCUMENT# F96000006794

Entity Name: GLOBAL ASSOCIATES (U.S.A.), INC.

Current Principal Place of Business:

2029 CROWLEY CIRCLE WEST
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2029 CROWLEY CIRCLE WEST
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 43-1742278 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARNOLD, MATHENY & EAGAN, P.A.
801 N. MAGNOLIA AVE.
SUITE 201
ORLANDO, FL 32803 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: DCPT ( ) Delete
Name: RIVERA, VICTOR L
Address: 2029 CROWLEY CIRCLE WEST
City-St-Zip: LONGWOOD, FL 32779

Title: DS ( ) Delete
Name: SCHULTE, MARK
Address: 1509 WASHINGTON AVE
City-St-Zip: ST LOUIS, MO 63103

Title: DV ( ) Delete
Name: ITUARTE, JESUS
Address: 1509 WASHINGTON AVE
City-St-Zip: ST LOUIS, MO 63103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change ( ) Addition
Name: SCHULTE, MARK
Address: 2200 PESTALOZZI ST
City-St-Zip: ST LOUIS, MO 63118 US

Title: DV (X) Change ( ) Addition
Name: ITUARTE, JESUS
Address: 2200 PESTALOZZI ST
City-St-Zip: ST LOUIS, MO 63118 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: VICTOR L RIVERA P 04/23/2005

Electronic Signature of Signing Officer or Director — Date