

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90190 001 ***150.00

DOCUMENT # M19562

1. Entity Name
USA CORP.

Principal Place of Business C/O COLLINS & COLLINS INVESTMENTS 801 BRICKELL AVE MIAMI FL 33131-2900 US	Mailing Address C/O COLLINS & COLLINS INVESTMENTS 801 BRICKELL AVE MIAMI FL 33131-2900 US
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80068262



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 801 Brickell Ave Suite, Apt. #, etc. Ninth Floor City & State MIAMI FL	3. Mailing Address 801 Brickell Ave Suite, Apt. #, etc. Ninth Floor City & State MIAMI FL
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4. FEI Number 59-2571184	Applied For Not Applicable
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Zip 33131 Country US	Zip 33131 Country US
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent BAUMWALL, DOUGLAS C/O COLLINS & COLLINS INVESTMENTS 801 BRICKELL AVE MIAMI FL 33131-2900	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTS BAUMWALL, DOUGLAS 801 BRICKELL AVE. MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCM BAUMWALL, DOUGLAS 801 BRICKELL AVE. MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Douglas Baumwall* Date 4/6/02 Daytime Phone # 305 235 4444

CR2E034 (10/00)