2005 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Jan 18, 2005 08:00 A			
DOCUMENT # P01000012186 1. Entity Name PARADE FLOATS U.S.A., INC.					Sec	retary	of State
Principal Plac	te of Business	Mailing Address	3 3	_			
3759 NW 38 MIAMI, FL 3		3759 NW 38 STREET MIAMI, FL 33142					
		,					
D	O NOT WRITE	CE	01122005 4. FEI Numbe	No Chg-P	CR2E034 (1	0/03) Applied For	
				65-1074			Not Applicable 75 Additional
	6. Name and Address of Current Re	ristered Agent		Or Owningato		□ Fee F	Required
SASSO, PAUL R ESQ 28 WEST FLAGLER STREET SUITE 505 MIAMI, FL 33130					NOT W HIS SP		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be led to Fees			
10.	OFFICERS AND DIF	RECTORS				···	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARTINO, TED M 3759 NW 38 STREET MIAMI, FL 33142					183702 30078-009	150.00
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-SY-ZIP				IN T	THIS SF	PACE	
TITLE NAME STREET ADDRESS						<u></u> — .	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TED M MARTINO - PRESIDENT

O1/12/05

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

CTTY - ST - ZIP TITLE

STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR