2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123309

Current Principal Place of Business:

Entity Name: NOTES USA CORPORATION

FILED Feb 28, 2005 Secretary of State

Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
FEI Number: 42-1608348	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
6187 NW 167 ST STE H-3 MIAMI, FL 33015	2		
Current Mailing Address	:	New Mailing Address:	
6187 NW 167 ST STE H-3 MIAMI, FL 33015	2		

CORTES, KEILA C 1601 NE 191 ST APT 117B NORTH MIAMI BEACH, FL 33179 US

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

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTSD Title: () Delete CORTES, KEILA C Name:

6187 NW 167 ST STE H-32 Address:

City-St-Zip: MIAMI, FL 33015

Title: () Delete

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

CORTES, KEILA C Name: Address: 6187 NW 167 ST STE H-32 City-St-Zip: MIAMI, FL 33015

New Principal Place of Business:

Title: **VPS** () Change (X) Addition

ALCANTARA, SHEILA Name: Address: 6187 NW 167 ST STE# H-32 MIAMI, FL 33015

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 Statutés. 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: KEILA A CORTES PT 02/28/2005