

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90299 048 ***150.00

DOCUMENT # 100009 1. Entity Name UNITED STATES CORPORATION COMPANY	
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Principal Place of Business 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808	Mailing Address 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
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DO NOT WRITE IN THIS SPACE



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number 13-6149455	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
~~SUITE 105~~ → please Remove
 TALLAHASSEE, FL 32301

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WINN, BRUCE R 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KENTON, JENNIFER A 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PARKER, DARLENE 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MASSIH, GEORGE 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSSER, MARK A 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFP FORTUNATO, JOHN 2711 CENTERVILLE RD., STE. 400 WILMINGTON, DE 19808

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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.

SIGNATURE:  **John Fortunato** 4-13-05 3026365400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #