2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #610440

1. Entity Name

U.S.A. ENTERPRISES OF MANATEE, INC.



FILED Apr 28, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1209 44TH AVENUE EAST BRADENTON, FL 34203 1209 44TH AVENUE EAST BRADENTON, FL 34203



04232004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1890325

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

	6. Name and Address of Content Regist	reica văcut				
GLASGOW, LOYD 1209 44TH AVENUE EAST BRADENTON, FL 34203			DO NOT WRITE IN THIS SPACE			
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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	U00000135589 04/28/04-80066-011	150.00
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLASGOW, LOYD H 4608 HWY. 41 NORTH PALMETTO, FL					:
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GLASGOW, MICHAEL S. 719 46TH ST CRT EAST OALMETTO, FL					:
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
TITLE NAME STREET ADDRESS CITY-SY-ZIP						
TITLE						

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:

NAME STREET ADDRESS CITY-ST-ZIP

Michael Glory

4-26-04

941-756-8727