

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # F00000004412

1. Entity Name
USAC HOLDINGS, INC.



Principal Place of Business
**3225 STATE ROAD 630 WEST
FORT MEADE, FL 33841**

Mailing Address
**3225 STATE ROAD 630 WEST
FORT MEADE, FL 33841**



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3095164

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DOBSON, MARIA I
3225 STATE ROAD 630 WEST
FORT MEADE, FL 33841**

**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 _____

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	CHEN, YU
STREET ADDRESS	3225 STATE ROAD 630 WEST
CITY-ST-ZIP	FORT MEADE, FL 33841

TITLE	S
NAME	DOBSON, MARIA I
STREET ADDRESS	3225 STATE RD 630 WEST
CITY-ST-ZIP	FORT MEADE, FL 33841

TITLE	AS
NAME	BOUTWELL, RONNIE W
STREET ADDRESS	3225 STATE ROAD 630 WEST
CITY-ST-ZIP	FORT MEADE, FL 33841

TITLE	VCD
NAME	YANG, HONGWEI
STREET ADDRESS	3225 STATE RD 630 W
CITY-ST-ZIP	FORT MEADE, FL 33841

TITLE	AFM
NAME	MAO, GUOTO
STREET ADDRESS	3225 STATE ROAD 630 WEST
CITY-ST-ZIP	FORT MEADE, FL 33841

TITLE	D
NAME	ZHANG, WEIPING
STREET ADDRESS	3225 STATE RD 630 W
CITY-ST-ZIP	FORT MEADE, FL 33841

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02/12/08-80005-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

[Signature] **WEIPING ZHANG**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/08

Date

(863) 285-8121

Daytime Phone #