

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F01000002383 1. Entity Name: L.S. HOLDINGS (USA), INC.				FILED 04 APR 30 PM 4:49 SECRETARY OF STATE TALLAHASSEE, FLORIDA																																					
Principal Place of Business 225 N.E. MIZNER BLVD., STE 300 BOCA RATON, FL 33432		Mailing Address 161-B CROWN BAY ST THOMAS, VI 00802																																							
2. Principal Place of Business 6800 NW Broken Sound Pkwy Suite, Apt. #, etc.		3. Mailing Address 6800 NW Broken Sound Pkwy Suite, Apt. #, etc.																																							
City & State: Boca Raton, FL Zip: 33467 Country:		City & State: Boca Raton, FL Zip: 33467 Country:		4. FEI Number 92-0150500																																					
5. Certificate of Status Desired ☐ \$8.75 As Fee Required		6. Name and Address of Current Registered Agent HOPPER, PATRICK J 225 N.E. MIZNER BLVD., STE 300 BOCA RATON, FL 33432																																							
7. Name and Address of New Registered Agent Name: C.T. Corporation System Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Rd. City: Plantation FL Zip: 33347		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: <i>Michael Chen</i> (NOTE: Registered Agent signatures required when reinstating) DATE:																																							
FILE NOV/01 FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																							
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PCD BAUMGARDNER, ROBERT L 161-B CROWN BAY ST THOMAS, VI 00802</td> <td style="width: 20%; text-align: center;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td>SD BOSTIC-HOLLAND, CLARETTA 161-B CROWN BAY ST THOMAS, VI 00802</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td>VTD HOPFER, PATRICK J 161-B CROWN BAY ST THOMAS, VI 00802</td> <td style="text-align: center;">☒ Delete</td> </tr> <tr> <td>TITLE</td> <td>D HERON, PATRICK 161-B CROWN BAY ST THOMAS, VI 00802</td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> </tr> </table>		TITLE	PCD BAUMGARDNER, ROBERT L 161-B CROWN BAY ST THOMAS, VI 00802	☐ Delete	TITLE	SD BOSTIC-HOLLAND, CLARETTA 161-B CROWN BAY ST THOMAS, VI 00802	☐ Delete	TITLE	VTD HOPFER, PATRICK J 161-B CROWN BAY ST THOMAS, VI 00802	☒ Delete	TITLE	D HERON, PATRICK 161-B CROWN BAY ST THOMAS, VI 00802	☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467</td> <td style="width: 20%; text-align: center;">☒ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467</td> <td style="text-align: center;">☒ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME 900035791 1199 05/10/04--01004--023 **150.00</td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467</td> <td style="text-align: center;">☒ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;">☐ Change ☐ Addition</td> </tr> </table>				TITLE	NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467	☒ Change ☐ Addition	TITLE	NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467	☒ Change ☐ Addition	TITLE	NAME 900035791 1199 05/10/04--01004--023 **150.00	☐ Change ☐ Addition	TITLE	NAME 6800 NW Broken Sound Pkwy Boca Raton, FL 33467	☒ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition
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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.																																									
SIGNATURE: <i>Robert Baumgardner</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4/22/04 Daytime Phone: 561 206 0080																																							