

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005684

Entity Name: U.S. HEARING AID CENTERS, INC.

FILED  
May 08, 2007  
Secretary of State

## Current Principal Place of Business:

350 ELDRIDGE AVE.  
SUITE 7  
ORANGE PARK, FL 32073

## New Principal Place of Business:

3513 HIGHWAY 17  
ORANGE PARK, FL 32003

## Current Mailing Address:

350 ELDRIDGE AVE.  
SUITE 7  
ORANGE PARK, FL 32073

## New Mailing Address:

3513 HIGHWAY 17  
ORANGE PARK, FL 32003

FEI Number: 37-1324082

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MELVIN, AMOS  
350 ELDRIDGE AVE.  
SUITE 7  
ORANGE PARK, FL 32073 US

## Name and Address of New Registered Agent:

MELVIN, AMOS  
3513 HIGHWAY 17  
ORANGE PARK, FL 32003 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: AMOS MELVIN

05/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MELVIN, AMOS  
Address: 350 ELDRIDGE AVE., SUITE 7  
City-St-Zip: ORANGE PARK, FL 32073

Title: SEC ( ) Delete  
Name: MELVIN, AMOS  
Address: 350 ELDRIDGE AVE., SUITE 7  
City-St-Zip: ORANGE PARK, FL 32073

Title: VP ( ) Delete  
Name: BAKER, VIRGIL W  
Address: 350 ELDRIDGE AVE., SUITE 7  
City-St-Zip: ORANGE PARK, FL 32073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MELVIN, AMOS  
Address: 3513 HIGHWAY 17  
City-St-Zip: ORANGE PARK, FL 32003

Title: SEC (X) Change ( ) Addition  
Name: MELVIN, AMOS  
Address: 3513 HIGHWAY 17  
City-St-Zip: ORANGE PARK, FL 32003

Title: VP (X) Change ( ) Addition  
Name: BAKER, VIRGIL W  
Address: 3513 HIGHWAY 17  
City-St-Zip: ORANGE PARK, FL 32003

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: AMOS MELVIN

P

05/08/2007

Electronic Signature of Signing Officer or Director

Date