2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005124

Entity Name: FED USA FRANCHISING GROUP, INC.

FILED Jun 27, 2007 Secretary of State

= incluy item	iiei EB 00/		, 1140.				
Current Principal Place of Business:				New Principal Place of Business:			
	DURN DRIVE, TX 75001	SUITE 500					
Current Mailing Address:				New Mailing Address:			
	DURN DRIVE, TX 75001	SUITE 500					
FEI Number:	: 20-2985154	FEI Number Applie	d For () FEI Nu	ımber Not Appl	licable ()	Certificate o	of Status Desired ()
Name and	Address of C	urrent Registered	Agent:	Name and	Address of	f New Regist	ered Agent:
1200 SOU	PORATION SYS TH PINE ISLAN ON, FL 33324	ND ROAD					
	named entity s e of Florida.	submits this statem	ent for the purpose	of changing i	ts registered	d office or regi	stered agent, or both,
SIGNATUR							
	Electron	ic Signature of Reg	istered Agent			Da	te
		3(2)(b), F.S., the corpo Trust Fund Contribu	oration did not receive tion ().	the prior notic	e.		
	S AND DIREC			ADDITION	IS/CHANGE	S TO OFFICI	ERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	CEO () CALLAHAN, KE 4450 SOJOURN ADDISON, TX	I DR., STE. 500		Title: Name: Address: City-St-Zip:		()Change()A	Addition
Title: Name: Address: City-St-Zip:	PRES () NOLAN, KATHE 4450 SOJOURN ADDISON, TX	I DR., STE. 500		Title: Name: Address: City-St-Zip:	PAPE, MAR	JRN DR., STE. 50	
Title: Name: Address: City-St-Zip:	EVP () MCPADDEN, M 4450 SOJOURN ADDISON, TX	I DR., STE. 500		Title: Name: Address: City-St-Zip:		()Change()A	Addition
Title: Name: Address: City-St-Zip:	CFO () PAPE, MARK E 4450 SOJOURN ADDISON, TX	*		Title: Name: Address: City-St-Zip:	HUFF, WILL	JRN DR., STE. 50	
Title: Name: Address: City-St-Zip:	SVP () SNYDER, DAVII 4450 SOJOURN ADDISON, TX	I DR., STE. 500		Title: Name: Address: City-St-Zip:	FISHER, JOS	STER DRIVE, SU	
Title: Name:	BILLINGS, SCC	Delete TT K		Title: Name:	VAUGHAN, V	(X) Change()/ /. VAN	

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.

City-St-Zip: ADDISON, TX 75001

SIGNATURE: JOSEPH G. FISHER SVP 06/27/2007

City-St-Zip: ADDISON, TX 75001