

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59503

FILED  
May 01, 2005  
Secretary of State

Entity Name: USCHI ENTERPRISES, INC.

## Current Principal Place of Business:

3016 E COMMERCIAL BLVD  
FT LAUD, FL 33308

## New Principal Place of Business:

## Current Mailing Address:

3016 E COMMERCIAL BLVD  
FT LAUD, FL 33308

## New Mailing Address:

FEI Number: 59-2153453

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANNELORE, HUBER  
5850 N.E. 14TH WAY  
FT. LAUDERDALE, FL 33334 US

## Name and Address of New Registered Agent:

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:

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: V ( ) Delete  
Name: HUBER, JOHANN,  
Address: 5850 NE 14TH WAY  
City-St-Zip: FT LAUDERDALE, FL 00000, 33334

Title: P ( ) Delete  
Name: HUBER, HANNELORE,  
Address: 5850 NE 14TH WAY  
City-St-Zip: FT LAUDERDALE, FL 00000, 33334

Title: S ( ) Delete  
Name: HUBER, HANS JURGEN,  
Address: 5290 NE 16TH AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33334

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HANNELORE HUBER

P

05/01/2005

Electronic Signature of Signing Officer or Director

Date