

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000003631 (5)

1. Corporation Name

CREDITSOURCE USA, INC.

Principal Place of Business

6701 CARMEL ROAD  
SUITE 205  
CHARLOTTE NC 28226

Mailing Address

6701 CARMEL ROAD  
SUITE 205  
CHARLOTTE NC 28226



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	07/14/1997	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	25-1795344	
24	Country	29	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PCTD	LEBDA, DOUGLAS R	2629 HYDRAULIC ROAD	CHARLOTTESVILLE VA	<input type="checkbox"/>
SD	LEBDA, TARA G	2629 HYDRAULIC ROAD	CHARLOTTESVILLE VA	<input type="checkbox"/>
D	WILSON, ROBERT G	151 CRANDON BLVD, STE 1127	KEY BISCAYNE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
PCTD	DOUGLAS R. LEBDA	9313 Olivia Lane	Charlotte, NC 28277	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	TARA G. LEBDA	9313 Olivia Lane	Charlotte, NC 28277	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Donald Colby	50127 Manly	Chapel Hill, NC 27514	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	W. James Tozer	65 E. 55th St., 9th FL.	NY, NY 10022	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Richard Field	200 Park Avenue, Suite 2600	NY, NY 10166	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

TARA G LEBDA

2/10/98

704-541-5351

CR2E034 (10/97)