

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G50230

Entity Name: U S EAST, INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

487 MEADOW LARK DR
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

487 MEADOW LARK DR
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 22-2466959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEIDER, HAROLD B
487 MEADOW LARK DR
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: SCHNEIDER, HAROLD B,
Address: 487 MEADOW LARK DR
City-St-Zip: SARASOTA, FL 34236

Title: VD () Delete
Name: SCHNEIDER, JAN
Address: 487 MEADOW LARK DR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: SCHNEIDER, SEITH
Address: 1 CROCKER STREET
City-St-Zip: SOUTH DARTMOUTH, MA 02748

Title: D () Delete
Name: KALISH, LYNN
Address: 3608 COUNTY PLACE LANE
City-St-Zip: SARASOTA, FL 34233

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:

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 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: SCHNEIDER, HAROLD B

CPD

04/20/2007

Electronic Signature of Signing Officer or Director

Date