

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # M03000001212

1. Entity Name
USA SECURITIES, LLC



Principal Place of Business
**4484 SOUTH PECOS ROAD
LAS VEGAS, NV 89121**

Mailing Address
**4484 SOUTH PECOS ROAD
LAS VEGAS, NV 89121**



01102004 No Chg-LLC -- CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
88-0482518

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
MILANOWSKI, JOSEPH D
4484 SOUTH PECOS ROAD
LAS VEGAS, NV 89121**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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000000005963
01/16/04-80015-015 55.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/12/04

Date

**(702)
734-2400**

Daytime Phone #