

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M11332

Entity Name: DISPLAYUSA, INC.

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1107 ROBIE AVE  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1486  
MOUNT DORA, FL 32756

**New Mailing Address:**

FEI Number: 59-2504369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JONES, RALPH  
1107 ROBIE AVE  
MOUNT DORA, FL 32757 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

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: JONES, RALPH  
Address: 1107 ROBIE AVE  
City-St-Zip: MOUNT DORA, FL 32757

Title: S  
Name: JONES, RALPH  
Address: 1107 ROBIE AVE  
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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 all other like empowered.

SIGNATURE: RALPH JONES

P

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date