

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001863

Entity Name: USA4SALE NETWORKS, INC.

FILED  
Feb 24, 2004  
Secretary of State

## Current Principal Place of Business:

2005 S.W. COLLEGE RD.  
#1  
OCALA, FL 34474

## New Principal Place of Business:

## Current Mailing Address:

2005 S.W. COLLEGE RD.  
#1  
OCALA, FL 34474

## New Mailing Address:

FEI Number: 59-3670706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RADFORD, HARVEY  
2005 S.W. COLLEGE ROAD  
OCALA, FL 34474 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: D ( ) Delete  
Name: RADFORD, HARVEY  
Address: 2821 S.W. 36TH DR.  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: RADFORD, CONNIE  
Address: 2821 S.W. 36TH DR.  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: WARREN, MICHAEL  
Address: 245 SE 54TH AVE  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: WARREN, LUANNE  
Address: 245 SE 54TH AVE  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: RADFORD, HARVEY  
Address: 5401 SW 88TH PLACE  
City-St-Zip: OCALA, FL 34476

Title: D (X) Change ( ) Addition  
Name: RADFORD, CONNIE  
Address: 5401 SW 88TH PLACE  
City-St-Zip: OCALA, FL 34476

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: HARVEY RADFORD

D

02/24/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date