

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001863

Entity Name: USA4SALE NETWORKS, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

22 SOUTH PINE AVENUE
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

22 SOUTH PINE AVENUE
OCALA, FL 34474 US

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:

RADFORD, HARVEY
22 SOUTH PINE AVENUE
OCALA, FL 34474 US

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:

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WARREN, LU ANNE
Address: 245 SE 54TH AVE
City-St-Zip: OCALA, FL 34471

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

TREA

04/14/2005

Electronic Signature of Signing Officer or Director

Date