2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000016090

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: USA SUN-WAY, INC.

Current Principal Place of Business:

6205 LAKE WILSON RD
SUITE C
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

6205 LAKE WILSON RD
SUITE C
DAVENPORT, FL 33837

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LE HELLEY, BERTRAND
6205 LAKE WILSON RD
SUITE C
DAVENPORT, FL 33837

Name and Address of New Registered Agent:

HEXAGON INTERNATIONAL INC
6205 LAKE WILSON RD
SUITE C
DAVENPORT, FL 33837

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: HEXAGON INTERNATIONAL INC 05/01/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	PUJAL, JAVIER	
Address:	6205 LAKE WILSON RD	
City-St-Zip:	DAVENPORT, FL 33837	
Title:	D	( ) Delete
Name:	ENCRENAZ, MAIFAN	
Address:	6205 LAKE WILSON RD	
City-St-Zip:	DAVENPORT, FL 33837	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PS	(X) Change ( ) Addition
Name:	PUJAL, JAVIER	
Address:	6205 LAKE WILSON RD	
City-St-Zip:	DAVENPORT, FL 33837	
Title:	VT	(X) Change ( ) Addition
Name:	ENCRENAZ, MAIFAN	
Address:	6205 LAKE WILSON RD	
City-St-Zip:	DAVENPORT, FL 33837	

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: PUJAL JAVIER P 05/01/2002
Electronic Signature of Signing Officer or Director Date