## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P00000018506

1. Entity Name
THE ON-HOLD COMPANY USA, INC.

FILED Apr 18, 2005 08:00 AM Secretary of State

Principal Place of Business

1412 89TH STREET NORTHWEST BRADENTON, FL 34209 Mailing Address

1412 89TH STREET NORTHWEST BRADENTON, FL 34209



DO NOT WRITE IN THIS SPACE

04152005 No Chg-P CR2

CR2E034 (10/03)

4. FEI Number 65-0984501 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
& IITRERA P.A.

SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134

SIGNATURE:

## 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. 1 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 relistance)  OATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financ  Trust Fund Contribution.			ig 🔲	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PSTD BARNES, ROBERT V 1412 89TH STREET NORTHWEST BRADENTON, FL 34209		•	•	
TITLE NAME STREET ADDRESS CATY-ST-ZIP					U00000312533 04/18/05-80092-016 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
HILE NAME STREET ADDRESS CHY-ST-ZIP					and the second of the second o
12. I heroby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					