## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE

BINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

## Jan 29, 2004 8:00 am Secretary of State 01-29-2004 90096 020 \*\*\*150 00 **DOCUMENT # P00000092642** 1. Entity Name INTERSUPPLY USA, INC. 94006681 Mailing Address Principal Place of Business 16261 LA COSTA DR 16261 LA COSTA DR WESTON, FL 33326 WESTON, FL 33326 01272004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1044700 --Not Applicable: 2 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent **GBS CONSULTANTS** DO NOT WRITE 1290 WESTON ROAD STE 306 IN THIS SPACE WESTON, FL 33326 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5:00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MELENDEZ, LUS A NAME STREET ADDRESS 16261 LA COSTA DR CITY-ST-ZIP WESTON, FL 33326 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director stree empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if activess, with all other like empowered. 12. Thereby certify that the information sup indicated on this report or supplemental of the corporation or the received changed, or on an attachment X SIGNATURE: \_

**FILED**