## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000010504

Entity Name: USACO WORLDWIDE, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
10900 NW 220	/ 21 ST #220				
DORAL, F	L 33172				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
10900 NW 220	/ 21 ST		10900 NW 21 ST #2 220	20	
DORAL, F	L 33172		DORAL, FL 33172		
FEI Number	: 65-1073227	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
TRUJILLC 771 SE 1S HIALEAH,		US			
		submits this statement for the	purpose of changing its register	rod office or registered agent or both	
iii tiie Stat	e of Florida.		parpose of enanging to register	red office of registered agent, of both,	
SIGNATU		,	parpoon or origing no regions	red office of registered agent, of both,	
	RE:	onic Signature of Registered Aç		Date	
SIGNATU	RE: Electro				
SIGNATU	RE: Electro	onic Signature of Registered Ac	gent		
SIGNATU	RE: Electro mpaign Financi S AND DIRE	onic Signature of Registered Aging Trust Fund Contribution ( ).  CTORS:  ) Delete LOS E	gent	Date	
SIGNATU  Election Cal  OFFICER  Title:  Name:  Address:	RE: Electro mpaign Financi S AND DIRE PD ( TRIANA, CAR 8123 NW 107 DORAL, FL 3	onic Signature of Registered Aging Trust Fund Contribution ( ).  CTORS:  ( ) Delete LOS E ( ) PATH 33178  ( ) Delete TES, ROSAURA	gent  ADDITIONS/CHANG  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTORS	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CARLOS TRIANA PD 01/19/2009