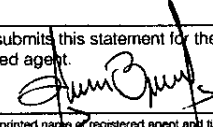
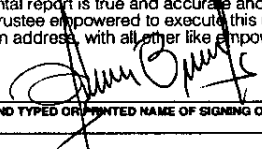


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90053 047 ***150.00

DOCUMENT # P01000010650 1. Entity Name 1012 USA, CORP.																													
Principal Place of Business 9103 SW 20 STREET #D BOCA RATON, FL 33428			Mailing Address 9103 SW 20 STREET #D BOCA RATON, FL 33428																										
2. Principal Place of Business 9103 D SW 20 STREET Suite, Apt. #, etc.		3. Mailing Address 9103 D SW 20 STREET Suite, Apt. #, etc.																											
City & State BOCA RATON FL Zip 33428		City & State BOCA RATON FL Zip 33428		4. FEI Number 65-1102134 Applied For ☐ Not Applicable																									
Country PALM BEACH		Country PALM BEACH		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent YOVANY, BONALDE J 1290 WESTON RD STE 306 WESTON, FL 33326				7. Name and Address of New Registered Agent Name YOVANY BONALDE Street Address (P.O. Box Number is Not Acceptable) 9103 D SW 20 STREET City BOCA RATON FL Zip Code 33428																									
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:  DATE: 04/04/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																											
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12. I hereby 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.
 SIGNATURE:  DATE: **04/04/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHECK #1152