

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90728 047 ***150.00

DOCUMENT # P01000016131 1. Entity Name RSK (USA) INC.			
Principal Place of Business 3225 HUNTERS LOOP CHASE KISSIMMEE, FL 34743		Mailing Address 3225 HUNTERS LOOP CHASE KISSIMMEE, FL 34743	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. 2118 PUTTAL PLACE		Suite, Apt. #, etc. 2118 PUTTAL PLACE	
City & State KISSIMMEE FL		City & State KISSIMMEE, FLORIDA	
Zip 34746		Zip 34746	
Country		Country	
4. FEI Number 59-3699212		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROGERS, SHARON 3225 HUNTERS LOOP CHASE KISSIMMEE, FL 34743		7. Name and Address of New Registered Agent Name: ROGERS SHARON Street Address (P.O. Box Number is Not Acceptable): 2118 PUTTAL PLACE KISSIMMEE City: KISSIMMEE FL Zip Code: 34746	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May-1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROGERS, RAY 3225 HUNTERS LOOP CHASE KISSIMMEE, FL 34743	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROGERS RAY 2118 PUTTAL PLACE KISSIMMEE, FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROGERS, SHARON 3225 HUNTERS LOOP CHASE KISSIMMEE, FL 34743	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROGERS SHARON 2118 PUTTAL PLACE KISSIMMEE, FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>SHARON ROGERS</u>		Date: <u>4/14/04</u> Daytime Phone #: <u>347 0288</u>	