2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106905

Entity Name: PROMUS USA CORP.

FILED Apr 12, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7800 SOUTHLAND BLVD SUITE 112 ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

7800 SOUTHLAND BLVD SUITE 112 ORLANDO, FL 32809

FEI Number: 59-3753331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

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.

SIGNATURE:

· ____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: ROMAN, RENE Name: ROMAN, RENE

Address: 6857 WEST COLONIAL DRIVE Address: 7800 SOUTHLAND BLVD. SUITE 112

City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32809

Title: SVD () Delete Title: SVD (X) Change () Addition

Name: ARCE, LUIS Name: ARCE, LUIS

 Address:
 6857 WEST COLONIAL DRIVE
 Address:
 813 VERMONT WOODS LN

 City-St-Zip:
 ORLANDO, FL 32818
 City-St-Zip:
 ORLANDO, FL 32809

Title: S () Delete Title: S (X) Change () Addition

Name: ARCE, YOLANDA Name: ARCE, YOLANDA

Address: 6857 WEST COLONIAL DRIVE Address: 813 VERMONT WOODS LN City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIS A. ARCE SVD 04/12/2004