

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000972

FILED
May 01, 2004
Secretary of State

Entity Name: USABRAZIL CORPORATION

Current Principal Place of Business:

2130 OLD WINTER GARDEN
ORLANDO, FL 32805

New Principal Place of Business:

3730 OLD WINTER GARDEN
ORLANDO, FL 32805 US

Current Mailing Address:

2130 OLD WINTER GARDEN
ORLANDO, FL 32805

New Mailing Address:

3730 OLD WINTER GARDEN
ORLANDO, FL 32805 US

FEI Number: 01-0553425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTINA RIVERA
1516 E. COLONIAL DR. 3107
ORLANDO, FL 32803

Name and Address of New Registered Agent:

LARSON, CAROLINE
1510 E. COLONIAL DR. 307
ORLANDO, FL 32803 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: CAROLINE LARSON

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LOPES, JOAO M
Address: 4936 CASON COVE DR. #306
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOPES, JOAO M
Address: 4768 WALDEN CIRCLE APT 326
City-St-Zip: ORLANDO, FL 32811 US

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: JOAO M LOPES

DP

05/01/2004

Electronic Signature of Signing Officer or Director

Date