

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90092 015 ***150.00

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DOCUMENT # P02000019383 1. Entity Name PERCS USA, INC.					
Principal Place of Business 401-B YELVINGTON AVE CLEARWATER, FL 33755			Mailing Address 6325 JACQUELINE ARBOR DR TEMPLE TERRACE, FL 33617		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 04-3636947	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DRUMMOND, TEMPLE H 6325 JACQUELINE ARBOR DRIVE TEMPLE TERRACE, FL 33617				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 re-registering) Signature, typed or printed name of registered agent and title if applicable. DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN !!		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRADHAM, CAROLYN 401-B YELVINGTON AVE CLEARWATER, FL 33755	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR, PRESIDENT BYERS, LEX J. 401-B YELVINGTON AVE CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CURCIO, AUGUST R 401-B YELVINGTON AVE CLEARWATER, FL 33755	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR, TREASURER STEINBERG, STEPHEN H. 401-B YELVINGTON AVE CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCHIFF, LAWRENCE 401-B YELVINGTON AVE CLEARWATER, FL 33755	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY CAREY, MICHAEL T. 401-B YELVINGTON AVE CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: 3/17/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					