


2006 FOR PROFIT CORPORATION ANNUAL REPORT

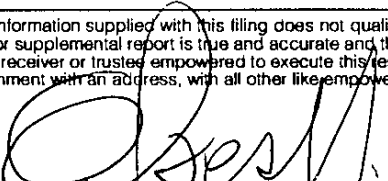
FILED
Jun 01, 2006 8:00 am
Secretary of State

06-01-2006 90003 036 ***158.75

DOCUMENT # P02000041926 1. Entity Name USA BUSINESS 1 .COM, INC.			
Principal Place of Business 4243 NW 107 AVE. # 304 MIAMI, FL 33178		Mailing Address 4243 NW 107 AVE # 304 MIAMI, FL 33178	
2. Principal Place of Business 10451 NW 33 ST Suite, Apt. #, etc. # 22 City & State MIAMI, FL 33172 Zip 33172 Country U.S.A		3. Mailing Address 10451 NW 33 ST Suite, Apt. #, etc. # 22 City & State MIAMI, FL 33172 Zip 33172 Country U.S.A	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		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) DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		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	D PAEZ, JORGE G 4243 NW 107 AVE. # 304 MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PAEZ JORGE G 10451 NW 33 ST # 22 MIAMI - FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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 exemptions contained in Chapter 119, 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:



ATTACHMENT
50020215
#P02000041926

ATTN
DIVISION OF CORPORATIONS
PO BOX 1500
TALLAHASSEE, FL 32302

To whom may it concern:

This letter in to let you know that we didn't fill our 2006 annual report on time because we moved to another address and we never received the notice by mail. Please excuse us this time to pay the fee. Thank you for your understanding.

Sincerely



Guillermo Paez
USABUSINESS 1.COM