

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057612

FILED
Apr 19, 2004
Secretary of State

Entity Name: USA CONSULTING OF TRI COUNTY, INC.

Current Principal Place of Business:

2637 E. ATLANTIC BLVD., SUITE 202
POMPANO BCH, FL

New Principal Place of Business:

2323 SW 31 AVE
HALLANDALE, FL 33009

Current Mailing Address:

2637 E. ATLANTIC BLVD., SUITE 202
POMPANO BCH, FL

New Mailing Address:

2323 SW 31 AVE
HALLANDALE, FL 33009

FEI Number: 37-1434845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, ANDRE
2637 E. ATLANTIC BLVD., SUITE 202
POMPANO BCH, FL

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: PRINCE, ANDRE
Address: 2637 E. ATLANTIC BLVD., SUITE 202
City-St-Zip: POMPAN0 BCH, FL

Title: P () Delete
Name: PRINCE, LOUIS
Address: 2323 SW 31 AVE
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS PRINCE

P

04/19/2004

Electronic Signature of Signing Officer or Director

Date