

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109179

Entity Name: IDEAL-USA, CORP.

FILED  
Apr 27, 2004  
Secretary of State

## Current Principal Place of Business:

314 BROOKCHASE LANE WEST  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

12497 CLIFFROSE TRAIL  
JACKSONVILLE, FL 32225

## Current Mailing Address:

314 BROOKCHASE LANE WEST  
JACKSONVILLE, FL 32225

## New Mailing Address:

12497 CLIFFROSE TRAIL  
JACKSONVILLE, FL 32225

FEI Number: 37-1444976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAZ, SAMUEL  
314 BROOKCHASE LANE WEST  
JACKSONVILLE, FL 32225

## Name and Address of New Registered Agent:

DIAZ, SAMUEL  
12497 CLIFFROSE TRAIL  
JACKSONVILLE, FL 32225

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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DIAZ, SAMUEL  
Address: 314 BROOKCHASE LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32225

Title: V ( ) Delete  
Name: ALVAREZ, VIRGINIA  
Address: 314 BROOKCHASE LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DIAZ, SAMUEL  
Address: 12497 CLIFFROSE TRAIL  
City-St-Zip: JACKSONVILLE, FL 32225

Title: V (X) Change ( ) Addition  
Name: ALVAREZ, VIRGINIA  
Address: 12497 CLIFFROSE TRAIL  
City-St-Zip: JACKSONVILLE, FL 32225

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: SAMUEL DIAZ

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date