

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110681

FILED
May 01, 2004
Secretary of State

Entity Name: EASTERN U.S.A. REALTY INC.

Current Principal Place of Business:

490 SE THANKSGIVING AVE
PORT ST LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

490 SE THANKSGIVING AVE
PORT ST LUCIE, FL 34984

New Mailing Address:

FEI Number: 11-3668489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPOLEON, ELIMA
490 SE THANKSGIVING AVE
PORT ST. LUCIE, FL 349811

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: P () Delete
Name: NAPOLEON, ELIMA
Address: 490 SE THANKSGIVING AVE
City-St-Zip: PORT ST LUCIE, FL 34984

Title: V () Delete
Name: ALTIDOR, MARJORIE
Address: 8251 NE 12 AVE
City-St-Zip: MIAMI, FL 33138

Title: ST () Delete
Name: ODETTE, NAPOLEON
Address: 490 SE THANKSGIVING
City-St-Zip: PORT SAINT LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: ALTIDOR, MARJORIE
Address: 4784 W COMMERCIAL BLVD
City-St-Zip: FT LAUDERDALE, FL 33319

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: ELIMA NAPOLEON

PRES

05/01/2004

Electronic Signature of Signing Officer or Director

Date