

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000110681

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

FILED
Mar 23, 2005
Secretary of State

Current Principal Place of Business:

490 SE THANKSGIVING AVE
PORT ST LUCIE, FL 34984

New Principal Place of Business:

1849 S.E. PT ST. LUCIE BLVD
PORT ST LUCIE, FL 34952

Current Mailing Address:

490 SE THANKSGIVING AVE
PORT ST LUCIE, FL 34984

New Mailing Address:

575 SW HALIFAX AVE
PORT ST LUCIE, FL 34953

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 US

Name and Address of New Registered Agent:

NAPOLEON, ELIMA
575 S.W. HALIFAX AVE
PORT ST. LUCIE, FL 34953 US

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: ELIMA NAPOLEON

03/23/2005

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: 4784 W COMMERCIAL BLVD
City-St-Zip: FT LAUDERDALE, FL 33319

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

Title: ST (X) Change () Addition
Name: ODETTE, NAPOLEON
Address: 575 HALIFAX AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

P

03/23/2005

Electronic Signature of Signing Officer or Director

Date