

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000120621

1. Entity Name
USA BUSINESS CORPORATION



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04-OCT-29-PM 4:56

Principal Place of Business
**6838 NW 77 CT
MIAMI, FL 33166**

Mailing Address
**6838 NW 77 CT
MIAMI, FL 33166**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



08182004 Chg-P CR2E034 (10/03)

4. FEI Number
51-0446028

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**DIAZ, NELSON I.
3501 SW 107 AV
MIAMI, FL 33165**

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 NELSON I. DIAZ DATE 08/25/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP ORTEGA, JULIO C 6838 NW 77 CT MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BUSTAMANTE, JULIO C 6838 NW 77 CT MIAMI, FL 33166 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT BUSTAMANTE, ANGELICA O 6838 NW 77 CT MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	REINSTATEMENT <u>04</u> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BUSRAMENTE, YUDY MARIBEL 2601 NORTHRUP DR. ROCKVILLE, MD 20850 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	800042315958 10/29/04--01055--030 **150.00 <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 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 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: Julio Bustamante JULIO BUSTAMANTE DATE 08/25/04 DAYTIME PHONE # 305 4417753

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2012

Florida Department of State

Division of Corporations

P.O Box 6327

Tallahassee, Florida 32314

Reason: Annual Report Notice

This letter is to know about the situation of Our Corporation, USA Business Corp.

We didn't receive the form to fill it and send it to you. It is very important for us, maintain a good record. Attached to this letter is the amount of \$150.00 (One hundred and fifty dollars) to renew our corporation. We hope everything is right, and we don't have any changes in our corporation. Thank you for your time and understanding.

Name: USA Business Corp

Document: P02000120621

Sincerely,

USA Business Corp