

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUN 11 AM 7:47

2007
STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000005320

1. Corporation Name

U.S.A ENTERPRISES SERVICES, CORP

2. Principal Office Address - No P.O. Box #
10147 BOCA ENTRADA BLVD.

3. Mailing Office Address
SAME

Suite, Apt. #, etc.
108

Suite, Apt. #, etc.

City & State
BOCA RATON, FL

City & State

Zip
33428

Country
USA

Zip

Country

REINSTATEMENT 04-07

06/11/07 01048 001 \$600.00

4. Date Incorporated or Qualified To Do Business in Florida 01/15/2003

5. FEI Number
30-0256759

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
ELENA DURAND

Street Address (P.O. Box Number is Not Acceptable)
10147 BOCA ENTRADA BLVD.

Suite, Apt. #, Etc.
108

City
BOCA RATON

State Zip Code
FL 33428

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Elena Durand
REGISTERED AGENT MUST SIGN

Date 06/06/07

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	DURAND, ELENA	10147 BOCA ENTRADA BLVD. #108	BOCA RATON, FL 33428

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Elena Durand
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/06/2007 561-483-3820
Date Daytime Phone #

June 6, 2007

**10147 Boca Entrada Blvd. # 108
Boca Raton, FL 33428**

RE: U.S.A ENTERPRISES SERVICES, CORP.
P03000005320

DEAR STATE DEPARTMENT,

PLEASE WAIVE MY LATE FEE BECAUSE, I DID NOT RECEIVE THE ANNUAL REPORT PAPER FROM THE YEAR 2004, 2005, 2006 AND 2007 IN MY HOUSE. I DIDN'T KNOW ABOUT THIS ANNUAL REPORT. I PROMISE YOU THAT NEXT YEAR, I WILL BE ONE OF THE FIRST PEOPLE TO FILE THE ANNUAL REPORT.

**MY NEW MAILING ADDRESS: 10147 Boca Entrada Blvd.
Boca Raton, FL 33428**

SINCERELY,

Elena Durand