

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008821

Entity Name: I.D. CARD OF USA, CORP.

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

15970 W. STATE ROAD 84  
SUITE 202  
SUNRISE, FL 33326

## New Principal Place of Business:

## Current Mailing Address:

15970 W. STATE ROAD 84  
SUITE 202  
SUNRISE, FL 33326

## New Mailing Address:

FEI Number: 47-0906366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OVALLE, FELIX  
6701 NW 166 TERRACE  
MIAMI LAKES, FL 33014 US

## Name and Address of New Registered Agent:

OVALLE, FELIX  
16380 SOUTH POST ROAD  
# 104  
WESTON, FL 33331 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: FELIX OVALLE

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: OVALLE, FELIX  
Address: 6701 NW 166 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: OVALLE, FELIX  
Address: 16380 SOUTH POST ROAD, # 104  
City-St-Zip: WESTON, FL 33331

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: FELIX OVALLE

PST

04/30/2004

Electronic Signature of Signing Officer or Director

Date