

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90029 012 ***150.00

DOCUMENT # P03000019871

1. Entity Name

USA PAYROLL STAFFING 02 03, INC.



Principal Place of Business

2075 FRUITVILLE RD., #200
SARASOTA FL 34237

Mailing Address

2075 FRUITVILLE RD., #200
SARASOTA FL 34237

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

54-2096859

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WENZEL, ROBERT L
2075 FRUITVILLE RD., #200
SARASOTA FL 34237

Name

Mary Jean Wenzel

Street Address (P.O. Box Number is Not Acceptable)

2075 FRUITVILLE RD. #200

City

Sarasota

FL

Zip Code

34237

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

Mary Jean Wenzel

(NOTE: Registered Agent signature required when reinstating)

DATE

1/18/06

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME WENZEL, ROBERT L
STREET ADDRESS 2075 FRUITVILLE RD., #200
CITY-ST-ZIP SARASOTA FL 34237

TITLE D ☒ Change ☐ Addition
NAME WENZEL, MARY JEAN
STREET ADDRESS 2075 FRUITVILLE RD. #200
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Mary Jean Wenzel President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/06

Date

941953-7777

Daytime Phone #