

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039026

Entity Name: REST ASSURED USA, INC.

FILED
Mar 02, 2004
Secretary of State

Current Principal Place of Business:

3017 CLUB DRIVE
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

3017 CLUB DRIVE
DESTIN, FL 32550

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, ANTHONY J
3017 CLUB DRIVE
DESTIN, FL 32550

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOOD, ANTHONY J
Address: 3017 CLUB DRIVE
City-St-Zip: DESTIN, FL 32550

Title: D () Delete
Name: PRITCHARD, ROBERT G
Address: 4310 CANOGA DRIVE
City-St-Zip: WOODLAND HILLS, CA 91364

Title: D () Delete
Name: LOVELAND, JANICE
Address: 20044 PCH LOWER
City-St-Zip: MALIBU, CA 90265

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: KELLY, HAYNES
Address: 22865 MAUDE LN.
City-St-Zip: BUENA VISTA, CO 81211

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: ANTHONY J WOOD

D

03/02/2004

Electronic Signature of Signing Officer or Director

_____ Date