## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # P03000042 s courier usa, inc.	N. S.		٠,	05-03-2004	90413 020	) ***150	0.00		
Principal Place of Business Mailing Address										
1030 VILLAGIO CIRCLE 1030 VILLAGIO CIRCLE										
APT. 208 APT. 208										
SARASOTA, FL 34237 . SARASOTA, FL 34237										
2. Principal Place of Business		3. Mailing Address ·								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04272004	Chg-P	CR2E034			
City & State		City & State			4. FEI Number	05651	272	No	plied For t Applicable	
Zip	p _ Country _ Zip		Country -		5. Certificate of Status Desired Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
				Name						
ETTINGER, MICHAEL W 1030 VILLAGIO CIRCLE APT. 208			Str	Street Address (P.O. Box Number is Not Acceptable)						
SARASOTA, FL 34237										
			Cit	у			FL	Zip Code		
	named entity submits this statement folions of registered agent.	r the purpose of changing its r	egistered off	ice or register	red agent, or bot	h, in the State of Flo	rida, I am far	niliar with,	and accept	
SIGNATURE										
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaig Trust Fund Contri		\$5.	.00 May Be led to Fees					
10.	OFFICERS AND DIRECTORS 11,				ADDITIONS/	CHANGES TO OFF	ICERS AND C	IRECTORS	S IN 11	
TITLE	D	☐ Delete	TITLE				(	Change	☐ Addition	
NAME STREET ADDRESS	ETTINGER, MICHAEL W 1030 VILLAGIO CIRCLE		NAME STREET ADD	DECC						
CITY-ST-ZIP	SARASOTA, FL 34237		CITY-ST-ZI						ĺ	
TITLE		☐ Delete	TITLE	<del>                                     </del>				Change	Addition	
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NAME			NAME							
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STREET ADDRESS			STREET ADD						)	
CITY-ST-ZIP			CITY-ST-ZI	2		· · · · · · · · · · · · · · · · · · ·				
TITLE		☐ Delete	TITLE	ł			[	Change	Addition	
NAME STREET ADDRESS			STREET ADD	RESS						
CITY-ST-ZIP			CITY-ST-ZI							
indicated of the cor	certify that the information supplied with l on this report or supplemental report is poration or the receiver or trustee empror on an attachment with an address	s true and accurate and that mo owered to execute this report a	y signature s is required b	hall have the : y Chapter 607	same legal effec	t as if made under o	oath; that I am	an officer	or director	