


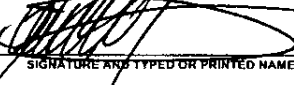


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90069 004 ***150.00

DOCUMENT # P03000055214 1. Entity Name USA INVESTMENT SERVICES, INC.					
Principal Place of Business 1535 SANDPIPER CIRCLE WESTON, FL 33327			Mailing Address 1535 SANDPIPER CIRCLE WESTON, FL 33327		
2. Principal Place of Business - No P.O. Box # 4581 Weston Road Suite, Apt. #, etc. #346		3. Mailing Address 4581 Weston Road Suite, Apt. #, etc. #346			
City & State Weston, FL		City & State Weston, FL		4. FEI Number 69-6156614	
Zip 33331		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MUNOZ, MARIA Y 1535 SANDPIPER CIRCLE WESTON, FL 33327				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4581 Weston Road Suite 346 City Weston FL Zip Code 33331	
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  _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MUNOZ, MARIA Y 1535 SANDPIPER CIRCLE WESTON, FL 33327 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Munoz, Maria <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4581 Weston Road # 346 Weston, FL 33331	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD PARRA MUNOZ, DIYER ANDRES 1535 SANDPIPER CIRCLE WESTON, FL 33327 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Parra Munoz, Dyer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4581 Weston Road #346 Weston, FL 33331	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			03-07-07 754-4229688 <small>Date Signature Phone</small>		