


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90050 050 ***150.00

| | |
|---------------------------------|---|
| DOCUMENT # P03000056111 |  |
| 1. Entity Name PKF USA, INC. | |

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|---|---|
| Principal Place of Business 190 N TESSIER DR SAINT PETERSBURG, FL 33706 | Mailing Address 190 N TESSIER DR SAINT PETERSBURG, FL 33706 |
|---|---|

40002483



| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

01142005 Chg-P CR2E034 (10/03)

4. FEI Number
41-2097398

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 | |
| JACOBSON, RICHARD A 501 E KENNEDY BLVD, STE 1700 TAMPA, FL 33602 | | Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | |
|---|--|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 | D PING, YAN RM 2116, E WING TWR, SICHUAN MANSION, NO 1 BEIJING, CHINA, 100037 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1002 B TOWER, JIANWAI SOHO, 39 DANGSAN BEIJING CHINA 100022 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PAPERIOWSKI, DAVID BRENT HOUSE, KENTON RD, HARROW, MIDDLESEX, HA3 8BT <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition UNIT 2, DEVONSHIRE BUSINESS PARK WOL BORHAMWOOD, HERTFORDSHIRE UK |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FERDI, SUJANTO BRENT HOUSE, KENTON RD, HARROW, MIDDLESEX, HA3 8BT <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition UNIT 2, DEVONSHIRE BUSINESS PARK BORHAMWOOD, HERTFORDSHIRE WOLUT UK |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BIRCH, CYNTHIA 190 N TESSIER DR SAINT PETERSBURG, FL 33706 <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 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 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:  1/14/05 727-367-9184

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #