## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000098782

Entity Name: USA TRUST, INC.

**FILED** Oct 20, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

11811 AVE. OF PGA 7-1A 15020 LAKE MAGDALENE BLVD.

PALM BEACH GARDENS, FL 33418 TAMPA, FL 33618

**Current Mailing Address: New Mailing Address:** 

11811 AVE. OF PGA 7-1A 15020 LAKE MAGDALENE BLVD.

PALM BEACH GARDENS, FL 33418 TAMPA, FL 33618

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

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SHARIFRAZY, RENEE SHARIFRAZY, RENEE 11811 AVE. OF PGA 7-1A

15020 LAKE MAGDALENE BLVD. PALM BEACH GARDENS, FL 33418 US TAMPA, FL 33618

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: RENEE SHARIFRAZY 10/20/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition SHARIFRAZY, RENEE SHARIFRAZY, RENEE Name: Name:

11811 AVE. OF PGA 7-1A 15020 LAKE MAGDALENE BLVD. Address: Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: TAMPA, FL 33618

Title: VD Title: (X) Change ( ) Addition () Delete SHARIFRAZY, JON PAUL Name: Name: SHARIFRAZY, JON PAUL

11811 AVE. OF PGA 7-1A Address: 15020 LAKE MAGDALENE BLVD. Address:

PALM BEACH GARDENS, FL 33418 TAMPA, FL 33618 City-St-Zip: City-St-Zip:

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: JON PAUL SHARIFRAZY VD 10/20/2005