

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000111139

Entity Name: USA SUPPLY LIMITED, INC.

**FILED**  
**Oct 12, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

5450 W HILLSBORO BLVD STE 6  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

5450 W HILLSBORO BLVD STE 6  
COCONUT CREEK, FL 33073

**New Mailing Address:**

FEI Number: 20-0286240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KATZ, ALYSE  
9177 SW 22 ST.  
STE. D  
BOCA RATON, FL 33428 US

**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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCALA, GRACE  
Address: 5450 W HILLSBORO BLVD STE 6  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KATZ, ALYSE  
Address: 5450 W HILLSBORO BLVD STE 6  
City-St-Zip: COCONUT CREEK, FL 33073

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: ALYSE KATZ

P

10/12/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date