

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123569

FILED  
Jan 14, 2004  
Secretary of State

**Entity Name:** THE ACADEMY OF SCIENCES OF THE UNITED STATES OF AMERICA, INC.

## Current Principal Place of Business:

1859 SW 31 AVENUE  
SUITE 100  
PEMBROKE PARK, FL 33009

## New Principal Place of Business:

400 KINGS POINT DRIVE  
SUITE 903  
SUNNY ISLES BEACH, FL 33160

## Current Mailing Address:

1859 SW 31 AVENUE  
SUITE 100  
PEMBROKE PARK, FL 33009

## New Mailing Address:

400 KINGS POINT DRIVE  
SUITE 903  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 80-0081616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

ZHUKOVA, VALENTINA  
1859 SW 31 AVENUE  
SUITE 100  
PEMBROKE PARK, FL 33009 US

## Name and Address of New Registered Agent:

ZHUKOVA, VALENTINA  
400 KINGS POINT DRIVE  
SUITE 903  
SUNNY ISLES BEACH, FL 33160 US

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:

01/14/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZHUKOVA, VALENTINA  
Address: 1859 SW 31 AVE  
City-St-Zip: PEMBROKE PARK, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ZHUKOVA, VALENTINA  
Address: 400 KINGS POINT DRIVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: VALENTINA ZHUKOVA

P

01/14/2004

Electronic Signature of Signing Officer or Director

Date