2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2005
Secretary of State

DOCUMENT# P04000054927

Entity Name: OCON U.S.A. INC.

Current Principal Place of Business:

P.O. BOX 1938
RIVERVIEW, FL 33568 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1938
RIVERVIEW, FL 33568 US

New Mailing Address:

FEI Number: 20-0922901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'CONNOR, RICHARD
3017 FOLKLORE DRIVE
VALRICO, FL 33594 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

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:

Title: P ( ) Delete
Name: O'CONNOR, SUSAN L
Address: 3017 FOLKLORE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP ( ) Delete
Name: O'CONNOR, RICHARD
Address: 3017 FOLKLORE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: CFO ( ) Delete
Name: O'CONNOR, MARIJANE
Address: 1 GRANADA PLACE
City-St-Zip: MASSAPEQUA, NY 11758

Title: V ( ) Delete
Name: O'CONNOR, EDWIN
Address: 39 JOLUDOW RD.
City-St-Zip: MASSAPEQUA PARK, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: SUSAN O'CONNOR PRES 06/08/2005

Electronic Signature of Signing Officer or Director Date