

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085902

Entity Name: USAGF40 CORP.

FILED
Apr 24, 2005
Secretary of State

Current Principal Place of Business:

500 S.E. 15TH STREET
SUITE 108
FORT LAUDERDALE, FL 33316 US

New Principal Place of Business:

167 DOCKSIDE CIRCLE
WESTON, FL 33327 US

Current Mailing Address:

500 S.E. 15TH STREET
SUITE 108
FORT LAUDERDALE, FL 33316 US

New Mailing Address:

167 DOCKSIDE CIRCLE
WESTON, FL 33327 US

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

Name and Address of Current Registered Agent:

SCHOPP, DAVID
500 S.E. 15TH STREET
SUITE 108
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

SCHOPP, DAVID
167 DOCKSIDE CIRCLE
WESTON, FL 33327 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: DAVID SCHOPP

04/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SCHOPP, DAVID
Address: 500 S.E. 15TH STREET, SUITE 108
City-St-Zip: FORT LAUDERDALE, FL 33316 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: SCHOPP, DAVID
Address: 167 DOCKSIDE CIRCLE
City-St-Zip: WESTON, FL 33327 US

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: DAVID SCHOPP

MR.

04/24/2005

Electronic Signature of Signing Officer or Director

Date