

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100853

Entity Name: USA TRANSMISSION, INC.

FILED  
Jan 25, 2008  
Secretary of State

## Current Principal Place of Business:

2699 S. ORANGE BLOSSON TRL  
ORLANDO, FL 32805

## New Principal Place of Business:

## Current Mailing Address:

2699 S. ORANGE BLOSSON TRL  
ORLANDO, FL 32805

## New Mailing Address:

FEI Number: 20-1334077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALDEZ, RAFAEL  
4964 BOATHOUSE DR  
ORLANDO, FL 32812 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: VALDEZ, RAFAEL  
Address: 2699 S. ORANGE BLOSSON TRL  
City-St-Zip: ORLANDO, FL 32805

Title: DV ( ) Delete  
Name: VALDEZ, LUISA  
Address: 2699 S. ORANGE TRL  
City-St-Zip: ORLANDO, FL 32805

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: VALDEZ, RAFAEL  
Address: 2699 S. ORANGE BLOSSON TRL  
City-St-Zip: ORLANDO, FL 32805

Title: DVS (X) Change ( ) Addition  
Name: VALDEZ, LUISA  
Address: 2699 S. ORANGE TRL  
City-St-Zip: ORLANDO, FL 32805

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RAFAEL VALDEZ

DPT

01/25/2008

Electronic Signature of Signing Officer or Director

Date