

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000103523

FILED
Dec 22, 2006
Secretary of State

Entity Name: SUITE USA MANAGEMENT, INC.

Current Principal Place of Business:

1301 PLANTATION ISLAND DRIVE S
SUITE 304
ST. AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

1301 PLANTATION ISLAND DRIVE S
SUITE 304
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 20-1352499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'MALLEY, ANDREW M
712 S. OREGON AVENUE
TAMPA, FL 33606 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: CEO () Delete
Name: FORT, DAVID
Address: 4422 S.W. 85TH WAY
City-St-Zip: GAINESVILLE, FL 32608 US

Title: P () Delete
Name: FORT, JASON L
Address: 1301 PLANTATION ISLAND DRIVE S - 304
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: CFO () Delete
Name: JOB, WHITE
Address: 10216 SW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: VP () Delete
Name: FORT-MOURO, MARIAH
Address: 236 GULL CIRCLE
City-St-Zip: SOUTH PONTE VEDRA BCH, FL 32082 US

Title: ST () Delete
Name: FORT, CLAUDIA A
Address: 4422 SW 85TH WAY
City-St-Zip: GAINESVILLE, FL 32608 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: VAN MOOK, ANTONIUS L
Address: 962 DEER HAMMOCK CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32080 US

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 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: ANTONIUS L VAN MOOK

P

12/22/2006

Electronic Signature of Signing Officer or Director

Date