

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109178

Entity Name: USA SWEEPING, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

16031 EMERALD COVE ROAD
WESTON, FL 33331

New Principal Place of Business:

2950 W. 84TH STREET
SUITE # 10
HIALEAH, FL 33018

Current Mailing Address:

P.O BOX 941496
MIAMI, FL 33194

New Mailing Address:

FEI Number: 20-1402455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IOSCOTE, NEUCI
16031 EMERALD COVE ROAD
WESTON, FL 33331 US

Name and Address of New Registered Agent:

IOSCOTE, NEUCI
10600 NW 21ST CT
SUNRISE, FL 33322 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: NEUCI IOSCOTE

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: IOSCOTE, NEUCI
Address: 16031 EMERALD COVE ROAD
City-St-Zip: WESTON, FL 33331

Title: VP () Delete
Name: FOURMENT, WILLIAM
Address: 16031 EMERALD COVE ROAD
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: IOSCOTE, NEUCI
Address: 10600 NW 21ST CT
City-St-Zip: SUNRISE, FL 33322

Title: VP (X) Change () Addition
Name: FOURMENT, WILLIAM
Address: 10600 NW 21ST CT
City-St-Zip: SUNRISE, FL 33322

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: NEUCI IOSCOTE

MS.

03/23/2009

Electronic Signature of Signing Officer or Director

Date