

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164379

Entity Name: USA MULTISERVICES, INC.

FILED  
Mar 18, 2005  
Secretary of State

## Current Principal Place of Business:

31429 LAWRENCE ST.  
SORRENTO, FL 32776

## New Principal Place of Business:

## Current Mailing Address:

31429 LAWRENCE ST.  
SORRENTO, FL 32776

## New Mailing Address:

FEI Number: 20-1971429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS  
1157 WEST STATE ROAD 436  
105  
ALTAMONTE SPRINGS, FL 32714 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: P, S ( ) Delete  
Name: CASHNER, MARIA A  
Address: 31429 LAWRENCE ST.  
City-St-Zip: SORRENTO, FL 32776 US

Title: VP ( ) Delete  
Name: GONCALVES, ARLESON  
Address: 31429 LAWRENCE ST.  
City-St-Zip: SORRENTO, FL 32776 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARIA A CASHNER

P

03/18/2005

Electronic Signature of Signing Officer or Director

Date