

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050475

FILED
Apr 30, 2006
Secretary of State

Entity Name: US ACCOUNTING PLUS CORPORATION

Current Principal Place of Business:

4015 WOODS EDGE CIRCLE APT B
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4015 WOODS EDGE CIRCLE APT B
PALM BEACH GARDENS, FL 33410

New Mailing Address:

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

Name and Address of Current Registered Agent:

FABIAN, HECTOR
890 WOODBINE WAY APT 817
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

FABIAN, HECTOR
1290 WOODBINE WAY APT 1214
PALM BEACH GARDENS, FL 33418 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: _____

Electronic Signature of Registered Agent

04/30/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR () Change (X) Addition
Name: FABIAN, HECTOR R
Address: 1290 WOODBINE WAY, APT. # 1214
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: HECTOR FABIAN

Electronic Signature of Signing Officer or Director

MR

04/30/2006

Date