


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90114 032 ***150.00

DOCUMENT # P05000097434 1. Entity Name FLINT U.S. HOLDINGS, INC.					
Principal Place of Business 590 SOUTH OAK AVENUE BARTOW, FL 33830 US				Mailing Address 590 SOUTH OAK AVENUE BARTOW, FL 33830 US	
2. Principal Place of Business 2800 WINTER LAKE ROAD		3. Mailing Address 16 CEDAR DRIVE			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State LAKELAND		City & State FETCHAM, SURREY		4. FEI Number 	
Zip FL 33803		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip KT22 9ET		Country U.K		6. Name and Address of Current Registered Agent CENTRAL FLORIDA VISA GROUP, INC. 2800 WINTER LAKE ROAD LAKELAND, FL 33803	
7. Name and Address of New Registered Agent Name 		Street Address (P.O. Box Number is Not Acceptable) 			
City FL		Zip Code 			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLINT, NICHOLAS J SEQUOIA 16 CEDAR DRIVE FETCHAM LEATHERHEAD, UK KT22 9ET <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: N.J.F. N.J. FLINT 22 March 2006 +44 7768 547217 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					