

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000119120

Entity Name: CONFIRMATION USA, INC.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

128 E MCNAB RD
#128
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

128 E MCNAB RD
#128
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 87-0782840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWART, DAVID
600 SE 2ND AVE
POMPANO BEACH, FL 33060 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: D () Delete
Name: SWART, DAVID
Address: 600 SE 2ND AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: LOMBARDI, JOSEPH
Address: 600 SE 2ND AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: STRIKOWSKI, ERIC
Address: 600 SE 2ND AVE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DAVID SWART

_____ Electronic Signature of Signing Officer or Director

PRES

01/19/2009

_____ Date