2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P06000140467

Entity Name
U.S.A. P.J.B., INC.



FILED Apr 15, 2008 08:00 A Secretary of State

Principal Place of Business

1249 E SILVERTHORN LOOP HERNANDO, FL 34442 Mailing Address

P O BOX 640634

BEVERLY HILLS, FL 34464



04102008

No Cha-P

CR2E034 (11/05)

FEI Number
74-2982273

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

KOEHL, FREDERICK 6050 W GULF TO LAKE HWY CRYSTAL RIVER, FL 34429

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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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE BERTRAND, PATRICK NAME STREET ADDRESS P O BOX 640634 CITY-ST-ZIP BEVERLY HILLS, FL 34464 TITLE NAME LOSSFELD, DEBORAH STREET ADDRESS 1249 E SILVERTHORN LOOP CITY-ST-ZIP HERNANDO, FL 34442 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/2008

Daytime Phone #