

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000033752

FILED
May 08, 2008
Secretary of State

Entity Name: USBA INC.

Current Principal Place of Business:

5338 EASTPOINTE LANE
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

5338 EASTPOINTE LANE
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-8646679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: DIOLA, NEIL
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: WARD, JAMES
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: SD () Delete
Name: HILL, RHONDA
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete
Name: HILL, JIM
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete
Name: KAMAKOTI, MAHESH
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete
Name: DATT, ABHISHEK
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DIOLA, NEIL
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: CABALAN, WILFREDO
Address: 5338 EASTPOINTE LANE
City-St-Zip: SARASOTA, FL 34232

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NEIL DIOLA

P

05/08/2008

Electronic Signature of Signing Officer or Director

Date