

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096144

Entity Name: USA CREDIT FUNDS, INC.

FILED
Mar 10, 2009
Secretary of State

Current Principal Place of Business:

2331 NORTH STATE ROAD 7
SUITE #218
LAUDERHILL, FL 33313

Current Mailing Address:

4613 NORTH UNIVERSITY DRIVE
SUITE #517
CORAL SPRINGS, FL 33067

New Principal Place of Business:

2331 NORTH STATE ROAD 7
SUITE #112
LAUDERHILL, FL 33313

New Mailing Address:

2331 NORTH STATE ROAD 7
SUITE #112
LAUDERHILL, FL 33313

FEI Number: 26-3835693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTOINE, PATRICK
4613 NORTH UNIVERSITY DRIVE
SUITE #517
CORAL SPRINGS, FL 33067 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: P () Delete
Name: ANTOINE, PATRICK P
Address: 4613 NORTH UNIVERSITY DR SUITE #517
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP () Delete
Name: DENIS, SAMSON VP
Address: 2331 NORTH STATE ROAD 7 SUITE #222
City-St-Zip: LAUDERHILL, FL 33313

Title: OFF () Delete
Name: DENIS, BOSSANT OFFICER
Address: 4471 NW 106TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: PATRICK ANTOINE

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date