

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000036533

FILED
Jul 01, 2004
Secretary of State

Entity Name: OURSE (U.S.A.), INC.

Current Principal Place of Business:

12196 SW 128TH ST.
MIAMI, FL 33186

New Principal Place of Business:

14808 SW 136 ST
MIAMI, FL 33196

Current Mailing Address:

12196 SW 128TH ST.
MIAMI, FL 33186

New Mailing Address:

14808 SW 136 ST
MIAMI, FL 33196

FEI Number: 95-4173234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, JEFFREY L ESQ
666 NORTHEAST 125 STREET
MIAMI, FL 33161

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: PD () Delete
Name: WILLIAMS, MAXINE
Address: 12196 SW 128 ST
City-St-Zip: MIAMI, FL 33186

Title: DV () Delete
Name: JORGE MARCELO VAZQUE, Z CHAVEZ
Address: 12196 SW 128 ST
City-St-Zip: MIAMI, FL 33186

Title: DS () Delete
Name: PAZ PAULETTE CHAIGNE, AU ROJAS
Address: 12196 SW 128 ST
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, MAXINE
Address: 14808 SW 136 STREET
City-St-Zip: MIAMI, FL 33196

Title: DV (X) Change () Addition
Name: JORGE MARCELO VAZQUE, Z CHAVEZ
Address: 14808 SW 136 ST
City-St-Zip: MIAMI, FL 33196

Title: DS (X) Change () Addition
Name: PAZ PAULETTE CHAIGNE, AU ROJAS
Address: 14808 SW 136 ST
City-St-Zip: MIAMI, FL 33196

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MAXINE WILLIAMS

PD

07/01/2004

Electronic Signature of Signing Officer or Director

_____ Date