FOR PROFIT CORPORATION

	JNIFORM BUSI	NESS REPO	RT (U	BR)		
DOCUMENT # P94000048659 1. Entity Name					FILED	
CAMEO SYSTEMS, INC.					1 The Said	
					02 NOV 25 AH 8: 11	
	DO NOT WRIT				SECRETARY OF STATE	• •
	DO MOL MRIT	E IN THIS	SPAC	Æ)A
2. Principal	Place of Business	3. Mailing Address	THE DATE OF		80000920 11/25/0201052	11348
<u>1460</u> N	1460 N.W. 107 Ave. 1460 N.W. 107			e.		/C4 **15U.UU
Suite, Apt. #, etc. Suite L Suite L Suite L					DO NOT WRITE IN THIS SPACE	
City & State City & State					A EELNimber	
	ami, FL 33172 Miami, FL		<u></u>		650496961	Applied For Not Applicab
33172	Country	33172	Cour	J'SA	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			* * * * * * * * * * * * * * * * * * * *		7. Name and Address of Current Regis	tered Agent
	DO NOT V	NDITE		Name Bey	Sedaghat	
DO NOT WRITE IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable) 1460 N.W. 107 Ave.		
	IN 1412 2	PACE		Suit		
				City Miam	ni	Tio Code
8. The above	named entity submits this slattynent	for the purpose of changing	The Consistence	•	ered agent, or both, in the State of Florida.	FL Zig 3172
Tax filing r (See criter	ration is eligible to satisfy its Intangit equirement and elects to do so. ia on back)	After M	lay 1, Fee is ded UBR is	\$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
TITLE	OFFICERS AN	D DIRECTORS		**************************************		
NAME	President		TITLE:	V 1	ce President	
STREET ADDRESS CITY - ST - ZIP	Bey Sedaghat 1460 N.W. 107 Av	e. Suite L	1 1 1 1 1 1	Ba	ron Sedaghat	
TIFLE	Miami, FL 33172		City-5	T-ZIP 141	60 N.W. 107 Ave. Suite	L
NAME	V		, TITLE NAME.			
STREET ADDRESS CITY-ST-ZIP				ADDRESS		•
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TREET ADDRESS			ANAME*** STREET A	DDRESS	A CONTRACTOR OF THE STATE OF TH	
TY-ST-ZIP			-GiTY-ST-	ZIP		
indicated or of the corno	tily that the information supplied with this report or aupplemental report is ration or the receiver or this team.	this filing does not qualify to true and accurate and that	or the exemp my signature	tion stated in Sect	tion 119.07(3)(i). Florida Statutes. Hurther cr ime legal effect as if made under oath: that	ertify that the information

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 11 or on an SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: 乂

Nuv. 19.02 305-192-7220 Date Dovine Phone

Law Offices Michael William Skop, P.A.

12865 West Dixie Highway Second Floor North Miami, FL 33161

Michael William Skop

Telephone (305) 899-8588 Facsimile (305) 892-8434

November 19, 2002

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: U.S. Alliance Services Corp.

Dear Sir/Madam:

Please be advised that this office represents Cameo Systems, Inc. I spoke with your office yesterday, and was advised to send this letter of explanation along with a completed Uniform Business Report and check for \$150.00.

It appears that the above-referenced company became dissolved for its failure to file an annual report, on October 4, 2002, one month ago. Our client had moved business locations (which is demonstrated on the new UBR), and apparently did not receive the annual report which needed to be completed. Our client had asked me to follow through a few months ago, and I inadvertently failed to do it.

Please accept this UBR and check, due to the above reasons. If, for any reason, you are unable to process this matter, please advise.

Sincerely,

Michael W. Skop

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Michael William/Skop, P. A

Ms\bjb