## CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED

03 MAR -7 AM 10: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P98000037319

1. Entity Name

**USEXF** 

PORTS, INC	
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O NOT WRITE IN THIS SPACE	<b>E</b>

	oo nei wkiit	: IN THIS S	PAC					
Principal Place of Business     1077 OLD HIGHWAY 17 SOUTH		3. Mailing Address P O BOX 701		,				
Suite. Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State CRESCENT CITY, FL		City & State CRESCENT CITY. FL		4. FEI Number 59-3507346	Applied For Not Applicable			
Zip 32112	Country PUTNAM	Zip 32112	Coun PUT	NAM		\$8.75 Additional ee Required		
					7. Name and Address of Current Registered	Agent		
				Name JOE H	H. PICKENS			
DO NOT WRITE				Street Address (i	ess (P.O. Box Number is Not Acceptable)			
	IN THIS SP	AUE	in a second		THIRD ST			
				City PALATK	(A FL	Zip Code 32177		
the obligat SIGNATURE . Jai	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent nuary 1 - May 1 Fee is \$150.00  After May 1, Fee is \$550.00  Amended UBR is \$61:25  Payable to Florida Department of	and title if applicable, (NO	•	ed office or register. d Agent signature required	ed agent, or both, in the State of Florida. I am la .  when reinstating)  DATE  9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND	DIRECTORS		magalagala sisuris ajarriyalari grafi	. 11 11111			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD, PAUL D. CAUSEY 1077 OLD HIGHWAY 17 S CRESCENT CITY, FL 321			a little of	03/7/03-01082-001 03/7/03-01082-001	250 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD, CHAD CIANI 1077 OLD HIGHWAY 17 S CRESCENT CITY, FL 321			Service of the Control	03/07/0301082002	**150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			STRE	et address -St-zip	DO NOT WRI	TE		
TIN: 6								

TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHAD CIANI

386-698-2021

Daytime Phone #

Date

N 3/10

## U S EXPORTS, INC. Post Office Box 701 Crescent City, FL 32112

February 22, 2003

Florida Department Of State Division Of Corporations Post Office Box 6327 Tallahassee, FL 32314

REF: Document # P98000037319

U S EXPORTS, INC

To Whom It May Concern:

The above referenced corporation has two issues. First, a 2002 Uniform Business Report was never received nor was a notice of failure to pay ever received.

Second, please note change of FEI Number, the correct FEI Number is 59-3507346. I am enclosing Uniform Business Reports for the year 2002 and 2003. I am also enclosing a check in the amount of \$ 150.00 for each years filing fee.

Please contact my CPA, William K. O'Brien, at 352-347-8080, if you have any further questions or concerns.

Thank you for your help with this matter.

Sincerely

Chad Ciani Vice President U S Exports, Inc.

**Enclosures:** 

2002 For Profit Corporation Uniform Business Report 2003 For Profit Corporation Uniform Business Report Copy of Notice of Administrative Dissolution or Revocation