## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000078433

Entity Name: U.S.A. LENDING INC.

FILED May 10, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

991 NORTH MIAMI BLVD NORTH MIAMI BCH BLVD MIAMI, FL 33162

991 NORTH MIAMI BEACH BOULEVARD NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:** 

**New Mailing Address:** 

991 NORTH MIAMI BLVD NORTH MIAMI BCH BLVD MIAMI, FL 33162

991 NORTH MIAMI BEACH BOULEVARD

NORTH MIAMI BEACH, FL 33162

FEI Number: 65-0862190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHOMAR, JOSEPH 17439 N.W. 66 COURT MIAMI, FL 33015

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD () Delete

STUDNIK, ETTIE Name:

3015 NW 79 ST. SECOND FLOOR Address:

City-St-Zip: MIAMI, FL 33147

( ) Delete Title: PTD

Name: FARAH, EMILE P.O. BOX 414182 N/A Address: MIAMI BEACH, FL 33141 City-St-Zip:

Title: VSD (X) Delete BARDOWELL, ZENA Name:

P.O. BOX 414182 N/A Address: City-St-Zip: MIAMI BEACH, FL 33141 Title: (X) Change ( ) Addition

Name: FARAH, EMILE N

991 NORTH MIAMI BEACH BOULEVARD Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VSD (X) Change ( ) Addition

Name: BARDAWELL, ZENA M

991 NORTH MIAMI BEACH BOULEVARD Address: NORTH MIAMI BEACH, FL 33162 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 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: EMILE FARAH PTD 05/10/2005