


**FILED**  
**May 13, 1999 8:00 am**  
**Secretary of State**

05-13-1999 90022 010 \*\*\*158.75

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> 1. Corporation Name <i>USA Academy</i> <i>P98000084744</i>					
Principal Place of Business <i>777 S. State Rd 7 Suite 5x</i> <i>Margate, FL 33068</i>			Mailing Address <i>Same</i>		
<b>2. Principal Place of Business</b> 21 <i>Same</i>		<b>2a. Mailing Address</b> 26 <i>Same</i>		<b>3. Date Incorporated or Qualified</b> <i>9/1998</i>	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		<b>4. FEI Number</b> <i>65-0879900</i>	
City & State 23		City & State 28		<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24		Zip 25		<b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country 26		Country 27		<b>7. This corporation owes the current year Intangible Personal Property Tax.</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. Name and Address of Current Registered Agent</b> <i>Chris Salinas</i> <i>6524 NW 55 St</i> <i>Coral Springs</i> <i>FL 33067</i>			<b>10. Name and Address of New Registered Agent</b>		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
85 Zip Code			86		
<b>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.</b>					
SIGNATURE <i>Chris Salinas</i> (NOTE: Registered Agent signature required when reinstating) DATE <i>4/19/99</i>					
<b>12. OFFICERS AND DIRECTORS</b>			<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>		
TITLE <input type="checkbox"/> DELETE NAME <i>C. SALINAS</i> STREET ADDRESS <i>6524 NW 55 St</i> CITY-ST-ZIP <i>Coral Springs, FL 33067</i>			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME <i>None</i> 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)