2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091505

Entity Name: C.L.S. GROUP USA, INC.

FILED Mar 25, 2005 Secretary of State

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

5900 TOWNSEND RD

APT 617

JACKSONVILLE, FL 32244

665 MACKENZIE CIR
ST AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

PO BOX 5032 DEERFIELD BEACH, FL 33442

FEI Number: 65-0874206 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:

LEIGHTON, JOHN
5900 TOWNSEND RD
665 MACKENZIE CIR
APT 617
ST AUGUSTINE, FL 32092 US
JACKSONVILLE, FL 32244 US

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: 03/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSVT () Delete Title: PSVT (X) Change () Addition

 Name:
 LEIGHTON, J
 Name:
 LEIGHTON, J

 Address:
 5900 TOWNSEND RD APT 617
 Address:
 665 MACKENZIE CIR

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 ST AUGUSTINE, FL 32092

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: JOHN LEIGHTON PRES 03/25/2005