2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004589

Entity Name: SUITE USA, INC.

FILED Jan 19, 2007 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:		
SUITE 304	TATION ISLANI STINE, FL 3208					
Current Mailing Address:			New Mailing Address:			
SUITE 304	TATION ISLANI STINE, FL 3208					
FEI Number:	59-3553035	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired	()
Name and	Address of Cu	rrent Registered Agent:	Name and Address of New Registered Agent:			
	ANDREW M HOREGON AVI 33606 US	ENUE				
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.						
SIGNATUR	E:					
Electronic Signature of Registered Agent					Date	
Election Cam	paign Financing 1	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D FORT, JASON 1301 PLANTATIO ST. AUGUSTINE,	N ISLAND DRIVE S - STE 304	Title: Name: Address: City-St-Zip:	FORT, CLAUDI	ION ISLAND DRIVE S - STE 304	1
Title: Name: Address: City-St-Zip:	D () D FORT, DAVID 4422 SW 85TH W GAINESVILLE, FL	/AY	Title: Name: Address: City-St-Zip:	VAN MOOK, AN	MMOCK CIRCLE	
Title: Name: Address: City-St-Zip:	D () D MOURO, MARIAH 236 GULL CIRCL SOUTH PONTE V		Title: Name: Address: City-St-Zip:	FORT-MOURO, 236 GULL CIRC		
Title: Name: Address: City-St-Zip:	D () D FORT, CLAUDIA A 4422 SW 85TH W GAINESVILLE, FL	4 /AY	Title: Name: Address: City-St-Zip:	D (X) FORT, DAVID F 7875 SOUTH A ST. AUGUSTINI	1A	
Title: Name: Address: City-St-Zip:	D () D WHITE, JOB E 10216 SW 49TH I GAINESVILLE, FL	LANE	Title: Name: Address: City-St-Zip:	CFO (X) WHITE, JOB E 10216 SW 49TI GAINESVILLE,		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CLAUDIA A FORT CEO 01/19/2007