

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004589

Entity Name: SUITE USA, INC.

FILED
Feb 06, 2008
Secretary of State

Current Principal Place of Business:

1301 PLANTATION ISLAND DRIVE S.
SUITE 304
ST. AUGUSTINE, FL 32080

Current Mailing Address:

1301 PLANTATION ISLAND DRIVE S.
SUITE 304
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

1301 PLANTATION ISLAND DRIVE S.
SUITE 304 A
ST. AUGUSTINE, FL 32080

New Mailing Address:

1301 PLANTATION ISLAND DRIVE S.
SUITE 304 A
ST. AUGUSTINE, FL 32080

FEI Number: 59-3553035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'MALLEY, ANDREW M
712 SOUTH OREGON AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: FORT, CLAUDIA A
Address: 1301 PLANTATION ISLAND DRIVE S - STE 304
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: P () Delete
Name: VAN MOOK, ANTONIUS L
Address: 962 DEER HAMMOCK CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VP () Delete
Name: FORT-MOURO, MARIAH
Address: 236 GULL CIRCLE
City-St-Zip: SOUTH PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: FORT, DAVID H
Address: 7875 SOUTH A1A
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: CFO () Delete
Name: WHITE, JOB E
Address: 10216 SW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: COO () Delete
Name: RACCINA, BARBARA
Address: 12050 BRIGHTMORE WAY
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: VAN MOOK, ANTONIUS L
Address: 1301 PLANTATION ISLAND DRIVE S - 304 A
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WIGGENS, ROD
Address: 117 SEAGROVE MAIN STREET - UNIT 201
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: CFO (X) Change () Addition
Name: RACCINA, BARBARA
Address: 12050 BRIGHTMORE WAY
City-St-Zip: JACKSONVILLE, FL 32246

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANTONIUS L. VAN MOOK

P

02/06/2008

Electronic Signature of Signing Officer or Director

Date