## 2004 FOR PROFIT CORPORATION

changed, or on an attachme

SIGNATURE:

## **FILED ANNUAL REPORT** Feb.03, 2004 08:00 AM Secretary of State DOCUMENT # P99000085306 1. Entity Name LORD USA, INC. Principal Place of Business Mailing Address 19451 SW 236 ST 19451 SW 236 ST HOMESTEAD, FL 33031 HOMESTEAD, FL 33031 01102004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 36-4322128 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HANSON, LESLIE A DO NOT WRITE 19451 SW 236 ST HOMESTEAD, FL 33031 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent eranature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be U000000033157 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE HANSON, LESLIE NAME STREET ADDRESS 19451 SW 236 ST HOMESTEAD, FL 33031 CITY-ST ZIP TITLE NAME STREET ARCRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY -ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP I hereby certify that the information indicated on this report or supplied of the corporation or the receiver. supplied with this titing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther certify that the information explain eport is thus and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director stustes empoyinged to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if