


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 08:00 AM.**  
**Secretary of State**

DOCUMENT # P99000098829	
1. Entity Name U.S.A. CONSTRUCTION SYSTEMS, INC.	

Principal Place of Business 113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004	Mailing Address 113 NORTH FEDERAL HIGHWAY DANIA BEACH, FL 33004 US
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DO NOT WRITE IN THIS SPACE



04222005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2505072	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  ADAMS, GERALD J 113 NORTH FEDERAL HIGHWAY C/O PAST-TAX DANIA BEACH, FL 33004
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVST COTE, MARC 1726 THOMAS STREET HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COTE, MARC 1726 THOMAS STREET HOLLYWOOD, FL 33020
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U00000356896  
05/04/05-80052-010 150.00

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR	Gerald J. Adams	APR 28 2005 Date Daytime Phone #
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