


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90053 047 ***150.00

DOCUMENT # P01000010650

1. Entity Name
1012 USA, CORP.



Principal Place of Business
9103 SW 20 STREET
#D
BOCA RATON, FL 33428

Mailing Address
9103 SW 20 STREET
#D
BOCA RATON, FL 33428

2. Principal Place of Business
9103 D SW 20 STREET
 Suite, Apt. #, etc.

3. Mailing Address
9103 D SW 20 STREET
 Suite, Apt. #, etc.

City & State
BOCA RATON FL

City & State
BOCA RATON FL

Zip
33428

Country
PALM BEACH

Zip
33428

Country
PALM BEACH



6. Name and Address of Current Registered Agent

YOVANY, BONALDE J
1290 WESTON RD STE 306
WESTON, FL 33326

4. FEI Number
65-1102134

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name
YOVANY BONALDE

Street Address (P.O. Box Number is Not Acceptable)
9103 D SW 20 STREET

City
BOCA RATON

State
FL

Zip Code
33428

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:  DATE: **04/04/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

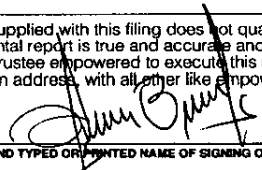
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PTD	BONALDE, YOVANY J	1290 WESTON ROAD STE 306	WESTON, FL 33326	<input checked="" type="checkbox"/>
VSD	BONALDE, HILDA C	1290 WESTON ROAD STE 306	WESTON, FL 33326	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PTD	BONALDE, YOVANY J	9103 D SW 20 STREET	BOCA RATON FL 33428	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VSD	BONALDE, HILDA C	9103 D SW 20 STREET	BOCA RATON FL 33428	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  DATE: **04/04/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHECK # 1152