2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010650

Entity Name: 1012 USA, CORP.

FILED Jul 05, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5976 NWWOLVERINE RD 5976 NW WOLVERINE RD PORT SAINT LUCIE, FL 34986 PORT SAINT LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

5976 NW WOLVERINE RD 5976 NWWOLVERINE RD PORT SAINT LUCIE, FL 34986 PORT SAINT LUCIE, FL 34986

FEI Number: 65-1102134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

YOVANY, BONALDE YOVANY, BONALDE 9103 D SW 20 STREET 5976 NW WOLVERINE RD. BOCA RATON, FL 33428 US PORT SAINT LUCIE, FL 34986 US

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: YOVANY BONALDE 07/05/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: (X) Change () Addition BONALDE, YOUANY J BONALDE, YOUANY J Name:

Name: 10353 SUNSTREAM LN 5976 NW WOLVERINE RD. Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: PORT SAINT LUCIE, FL 34986

VSD Title: VSD (X) Change () Addition Title: () Delete Name: BONALDE, HILDA C Name: BONALDE, HILDA C

10353 SUNSTREAM LN 5976 NW WOLVERINE RD. Address: Address: BOCA RATON, FL 33428 PORT SAINT LUCIE, FL 34986 City-St-Zip: City-St-Zip:

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: YOVANY BONALDE PTD 07/05/2006