## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT **1998** 



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 541451

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U.S.A. FINANCIAL CORPORATION, INC. Principal Place of Business Mailing Address 1312 S.W. 27TH AVE., 2ND FL 1312 S.W. 27TH AVE., 2ND FL **MIAMI FL 33145** MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/21/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1789248 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional X 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name LAVINA, ARMANDO J. 1312 S.W. 27TH AVE., 2ND FLOOR 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed nanic of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE Addition LAVINA, ARMANDO J. NAME 1.2 NAME 1312 SW 27TH AV STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP ÖLLETE Change Addition TITLE 2.1 TITLE LAVINA, SONIA B. NAME 2.2 NAME 1312 SW 27TH AV STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition LAVINA, ARMANDO G. NAME 3.2 NAME 1312 SW 27TH AV STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE TITLE 6 1 TITLE ☐ Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with the though does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental armal 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 receipt por true to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or out appears in the receipt port of the corporation of the corporation of the corporation of the receipt port of the corporation of the corp

SIGNATURE:

ARMANDO OF LOVE

2-24-58

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**FILED** 

Mar 03 1998 8:00am

Secretary of State