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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F9600000252 (4)

FILED Jan 20 1998 8:00am Secretary of State

IMPSAI	USA, INC.													
Principal Place	of Business	Mailin	ng Address						<u>ing kián india billi beki</u>	E BOSSI SBIII I	MULLI WALES I	10110 (FED) A	(8)0 01 103 1	
ONE FINANCIAL PLAZA, SUITE 2500 ONE FINANCIAL PLAZA, S FT. LAUDERDALE FL 33394 FT. LAUDERDALE FL 3339														
TI. GIOGEIG	THE 12 OCCUPANT								DO NOT	WRITE IN	THIS SE	PACE		
									ncorporated or Qua 6/1996	alified				
2. Principal Place of Business			2a. Mailing Address					4. FEI Nu	mber .		•	A	pplied For	
21			26					65-	0600569			N	lot Applicab	ile
Suite, Apt. #, etc.			Suite, Apt. #, etc.					E Cortific	ate of Status Desi	red [_		Additional	
22			27					J. Ceruno	ALC OF CIACUS DOS!			Fee B	Required	
City & State			City & State					6. Election	n Campaign Finan	clng	_		May Be	
23			28					Trust F	und Contribution			Added	to Fees	_
Zip	Country	Zi _l	Zip Co			•	ŀ		orporation owes or	-	_			
24	25	29		30			<u> </u>		al Property Tax du				∐ No	
	9. Name and Address of Current	Register	ed Agent		-	·		10. Name	and Address of N	lew Hegis	stered A	gent		
	CORPORATION SYSTEM				81	Name)							
120	10 SOUTH PINE ISLAND ROAD				82	Stree	t Addres	s (P.O. Box	Number is Not Ad	ceptable))			
PL/	Intation FL 33324													_
					83									
					84	City				•		85 Zip	Code	\dashv
					1	' '					FL			
11. Pursuant l office or re agent. I a	o the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607. Florida. ons of, Se	1508, Florida Statu Such change was ection 607.0505, F	ites, the a authorize Iorida Sta	bove d by tutes	e-name the co s.	d corpor rporation	ation submi n's board of	its this statement for directors. I hereby	or the pur y accept t	pose of o the appo	changing intment as	its registere s registered	đ
SIGNATURE														_
	Signature, typed or printed name of registered agent		<u> </u>			ent signatu	re required	when reinstating			DATE			
12.	OFFICERS AND	DIRECTO		13.				ADDITIO	ONS/CHANGES TO) OFFICE		_ Change		- I
TITLE	DIVELLE ALEVANDED		DELETE	1,1 7								Onlinge	TI Yada	"
NAME	RIVELIS, ALEXANDER	2500			AME									
STREET ADDRESS	ONE FINANCIAL PLAZA, SUITE	2500				ADDRESS	1							
CITY-ST-ZIP	FT. LAUDERDALE FL		- December			T-ZIP	-					Change	Additle	_
TITLE	P PICTURE		DELETE	2.1 \							L	Grange	Addati	Jul
NAME	HORNER, RICHARD	OEOO		2.2 N										
STREET ADDRESS	ONE FINANCIAL PLAZA, SUITE	2300				ADDRESS	•							
CITY-ST-ZIP	FT. LAUDERDALE FL					ST-ZIP						7 05	1 1 6 2 5 14	_
TITLE	S S S S S S S S S S S S S S S S S S S		☐ DELETE	3,1 T							L	Change	Additi	าก
NAME	BELT, BRIAN				AME									
STREET ADDRESS	701 BRICKELL AVE 1850			3.3 9	TREET	ADDRESS	·							
CITY-ST-ZIP	MIAMI FL			_		ST-ZIP							1 1 2 1 5 1 5 1	
TITLE	1		DELETE	4.1 7	ITLE		1				L	Change	Additi	อก
NAME	TORRES, JOSE	4865		4. 2	NAME									
STREET ADDRESS	ONE FINANCIAL PLAZA, SUITE	2500		4.3 9	TREET	ADDRESS								
CITY-ST-ZIP	FT. LAUDERDALE FL 33394			4.4 0	aty-s	T-ZIP		**						_
TITLE	СОВ		☐ DELETE	5.1 1	ITLE						I	Change	Additi	ən
NAME	VERDAGUER, RICARDO			5.21	IAME		1							- {
STREET ADDRESS	ONE FINANCIAL PLAZA, SUITE	2500		5.3 \$	TREET	ADDRESS							-	
CITY-ST-ZIP	FT LAUDERDALE FL			5.4 0	my-s	IT-ZIP							/	
TITLE			DELETE	6.1 1	TLE			/ <u> </u>) <u> </u>			Change	Additi	on
NAME				6.21	IAME		Viv	″o,k	OBERTO		_			
STREET ADDRESS				6.3 9	TREET	ADDRESS	one	FIDAN	COBERTO CIAL Phaza	, Sui	# #	00		
CITY-ST-ZIP				6.4 0	iπy-s	ST-ZIP	Pc.	LANDE	LUAUE, F					
	ertify that the information supplied with	this filing	d does not qualify				ted in Se	ection 119.0	7(3)(i), Florida Sta	itutes. I fu	rther cer	lify that th	e informatic	in

Indicated on this annual report or supplied which is filling does not qualify for the exemption stated in Section 1.18.07(5)(f). Florida diatities. Flucturer certify that the indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or an attachment with an address.

JAN7, 1998 954-779-7171