

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

FILED
Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000004338 (7)
1. Corporation Name
USYS, INC.



Principal Place of Business 18440 NE 21ST CT NORTH MIAMI BEACH FL 33179	Mailing Address 18440 NE 21ST CT NORTH MIAMI BEACH FL 33179
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2280 NE 215 ST. Suite, Apt. #, etc. 22 City & State MIAMI 23 Zip FL, 33150 24 Country DADE		2a. Mailing Address 26 2280 N.E. 215 ST Suite, Apt. #, etc. 27 City & State MIAMI 28 Zip 33150 29 Country DADE		3. Date Incorporated or Qualified 08/23/1996 4. FEI Number 65-0680703 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
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9. Name and Address of Current Registered Agent GRAHAM, BRENDAN 18440 NE 21ST CT NORTH MIAMI BEACH FL 33179				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2280 N.E. 215 ST 83 84 City MIAMI FL 85 Zip Code 33150			
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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 Brendan Graham BRENDAN GRAHAM DATE 3/14/98
(Signature, typed or printed name 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD GRAHAM, BRENDAN 18440 NE 21ST CT NORTH MIAMI BEACH FL 33179 ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 2280 N.E. 215 ST MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALWAH, ALICIA 18440 NE 21ST CT NORTH MIAMI BEACH FL 33179 ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☒ Change ☐ Addition 2280 N.E. 215 ST MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. 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 annual report or supplemental 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 on an attachment with an address.

SIGNATURE: Brendan Graham BRENDAN GRAHAM / 3/14/98 305-935-9826

CFR2034 (10/97)