

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Lorena B. Murphree
Secretary of State
Division of CORPORATIONS

DOCUMENT # **M98524** (5)
1. Corporation Name
STEF USA, INC.

APR 20 1995
95 MAR 14 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Address
**386 SHEFFIELD CIRCLE
PALM HARBOR FL 34683**

2. Principal Place of Business
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24

2a. Mailing Address
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DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification
09/14/1988

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2908102

Applied For
 Not Applicable

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

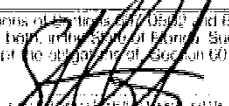
6. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for the corporate tax under S. 1991, Florida Statutes **NO**

9. Name and Address of Current Registered Agent
**SOROTA AND SZCHAU, P.A.
2515 COUNTRYSIDE BLVD.
SUITE A
CLEARWATER FL 34623**

10. Name and Address of New Registered Agent
81 Name **STEPHAN GINEZ**
82 Street Address (P.O. Box Number is Not Acceptable)
386 SHEFFIELD CIRC
83
84 City **PALM HARBOR** FL 85 Zip Code **34683**

11. Pursuant to the provisions of Sections 607.0503 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE:  **DOT STEPHAN GINEZ** 04-15-95

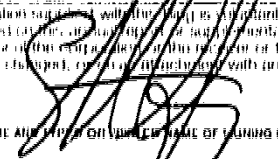
12. OFFICERS AND DIRECTORS

12.1 NAME	DP GINEZ, STEPHANE
12.2 STREET ADDRESS	386 SHEFFIELD CIRCLE
12.3 CITY, ST, ZIP	PALM HARBOR FL
12.4 NAME	DST GINEZ, DANIELLE
12.5 STREET ADDRESS	386 SHEFFIELD CIRCLE
12.6 CITY, ST, ZIP	PALM HARBOR FL
12.7 NAME	
12.8 STREET ADDRESS	
12.9 CITY, ST, ZIP	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	

14. I, the undersigned, certify that the information submitted with this report is a true and correct statement of the facts and that the information is true and correct. I am an officer or director of the corporation or a person authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or both, as indicated with an address.

SIGNATURE:  **DOT STEPHAN GINEZ (813)461 6298**