


**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 28 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N96000004342 (9)**  
 1. Corporation Name

**TUMI USA AWARD, INC.**



Principal Place of Business <b>8347 S.W. 40TH STREET MIAMI FL 33155</b>	Mailing Address <b>8347 S.W. 40TH STREET MIAMI FL 33155</b>
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3. Date Incorporated or Qualified <b>08/16/1996</b>
4. FEI Number <b>65-0711385</b>
Applied For <input type="checkbox"/>
Not Applicable <input type="checkbox"/>

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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6. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
8. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
<b>MASSA, SERGIO 8347 S.W. 40TH STREET MIAMI FL 33155</b>	

10. Name and Address of New Registered Agent	
B1 Name	
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	FL B5 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ROSEBROUGH, GLORIA	1.1 TITLE	VSD
NAME	1835 SW 102 COURT	1.2 NAME	
STREET ADDRESS	MIAMI FL 33165	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VSD BRADELY, NANCY	2.1 TITLE	DP
NAME	13043 SAN JOSE ST.	2.2 NAME	BRADELY, NANCY
STREET ADDRESS	CORAL GABLES FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	TD MASSA, SERGIO	3.1 TITLE	
NAME	8347 SW 40TH STREET	3.2 NAME	
STREET ADDRESS	MIAMI FL 33155	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on an attachment with an address.

SIGNATURE: Gloria Rosebrough 4/20/98 (305) 220-3420

CR2E037 (10/97)