2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 24, 2005 08:00 AM Secretary of State DOCUMENT # N96000004342 1. Entity Name TUMI USA AWARD, INC. Mailing Address Principal Place of Business_ 8347 S.W. 40TH STREET 8347 S.W. 40TH STREET MIAMI, FL 33155 MIAMI, FL 33155 01202005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0711385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MASSA, SERGIO 8347 S.W. 40TH STREET MIAMI, FL 33155 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS 10. TITLE ROSEBROUGH, GLORIA NAME STREET ADDRESS 1835 SW 102 COURT CITY-ST-ZIP MIAMI, FL 33165 NAME BRADLEY, NANCY STREET ADDRESS 13043 SAN JOSE CT. U000001**950**62 CITY-SY-ZIP CORAL GABLES, FL 01/26/05-80014-002 61.25 TITLE VSTD MASSA, SERGIO NAME STREET ADDRESS 8347 SW 40TH STREET DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33155 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IME

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CLTY-ST-ZIP

> SERGIO MASSA SIGNATURE AND OFFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED