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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400036703 (4)

N 4/6197

BONNEVILLE U.S.A. ENTERPRISES, INC.

DBA AMERICAN

High Tech

themas, Inc

FILED

May 21 1997 8:00am

Secretary of State

2700 W. ATLANTIC BLVD. STE. 204		Mailing Ad	Mailing Address			r jamiriam ira rassi dibir dilir dilir dilir dilir dilir dilir (1991 dilir (1991)			
		2700 W. AT	LANTIC BLVD.						
		STE. 204		444=					
POMPANO BEACH FL 3	3069	POMPANO I	BEACH FL 33089-3	2597			···		
						3. Date Incorporated or Qualified 05/12/1994	3a. Date of L 05/10/19		
2. Principal Place of B	usiness	2a. Mailing	Address			4. FEI Number		Applied For	
21		26	26			65-0491766	r	Not Applicable	
l Sulte, Apt. #. etc.		Suite, A	Suite, Apt. #, etc.			E Costificate of Status Desired	\$8.	75 Additional	
22		27	27			5. Certificate of Status Desired	L) F	ee Required	
City & State		City & S	City & State			6. Election Campaign Financing	\$5	.00 May Be	
23		28				Trust Fund Contribution		ded to Fees	
Zip	Country	Zip		Country		8. This corporation has liability for in	ntangible tax un	der s. 199.032.	
24	25	29	30)			Yes No		
	me and Address of Cu	rrent Registered Ag	ent			10. Name and Address of New Reg	Istered Agent		
gonzalez,	ROBERT			81	Name				
5901 NW 70		82 Street Ad			Address (P.O. Box Number is Not Acceptable)				
TAMARAC F	L 33321		82 Street Ad			duress (n.o. Box Number is Not Acceptable)			
				83					
,				84	City		ine l	Zio Codo	
					•		FL 85	Zip Code	
11. Pursuant to the pro	ovisions of Sections 607.	0502 and 607.1508,	Florida Statutes	the above	e-named corp	poration submits this statement for the pu	rpose of chang	jing its registered	
agent. I am familia	with and acceptable of	bligations of, Section	607.0505, Florid	a Statutes	tne corpora i.	poration submits this statement for the pution's board of directors. Thereby accept	t the appointme	nt as registored	
SIGNATURE	15	d agent ann tit e if applicable				(red when reinstating)	/13/9	2	
12,		AND DIRECTORS	morr. a	13.	nt aignatore requi	ADDITIONS/CHANGES TO OFFICE	EDS AND DIDE	TODG IN 10	
TITLE P			DELETE	1.1 TITLE		ADDITIONS/OFFIANGES TO OFFICE	Ch		
NAME GONZ	ALEZ, ROBERT	_		1.2 NAME			L 0/1	ango	
2004	TREET ADDRESS - 5901 NW 70TH AVE.				ADDRESS				
	RAC FL 33321				- 1				
TITLE			DELETE	1.4 CITY - S 2.1 TITLE	1 · ZIP		☐ Ch	ange Addition	
NAME -				2.2 NAME				ange Addition	
STREET ADDRESS					IDDOCCO				
				2.3 STREET					
CITY-ST-ZIP TITLE	**************************************	· · · · · · · · · · · · · · · · ·	DELETE	2 4 CITY - S	T- ZIP		- FT AL		
NAME		L	_ Octob	3 1 TITLE			☐ Ch	ange L Addition	
				3.2 NAME					
STREET ADDRESS				3 3 STREET				1	
CITY-ST-ZIP			DELEXE	3.4. CITY - S	1 - ZIP				
		L	DELETE	4 1 TITLE			∟ Cha	ange 🗀 Addition	
NAME				4 2 NAME	,				
STREET ADDRESS				4.3 STRFET	ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	7	4.4 CHTY - S	- ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE		L	DELETE	51 TITLE			Cha	ange 🗌 Addition	
NAME			1	5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		5.4 CITY - S	- ZIP				
TITLE			DELETE	6.1 TITLE			☐ Chá	inge 🔲 Addition	
NAME				6.2 NAME		60000220	1816	05	
STREET ADDRESS				6.3 STREET	ADDRESS	60000220 -06/04/970109	1023	5/21/97	
CITY-ST-ZIP				6.4 CITY-S	- ZIP	***185.00		71011.1	

14. I do 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 alternative with an address