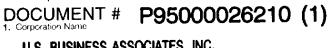
PROFIT \* CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

U.S. BUSINESS ASSOCIATES, INC.





95 SEP -3 PH 4: 24



Principal Place of Business  5440 S.W. 148 PLACE MIAMI FL 33185		Mailing Address 5440 S.W. 148 PLACE					
							-
		La Malana Address			<b>04/03/1995 4.</b> FEI Number	<del></del>	X Applied For
2. Principal Pla	ace of Business	2a. Mailing Address 26					Not Applicable
1		Suite, Apt. #, etc.					\$8.75 Additional
Suite, Apt. #	#, etc.	27			5. Certificate of Status Desired		Fee Required
City & State		City & State			6. Election Campaign Financing		<b>\$5.00</b> May Be
3		28			Trust Fund Contribution		Added to Fees
Zip	Country	70	Country	,	8. This corporation has liability for	intang/ble tax	under s. 199.032,
4	25	29	30			M No	
_1	g. Name and Address of Currer	nt Registered Agent		T	10. Name and Address of New F	registered A	gent
			81				
AMERILAWYER				32 Street Address (P.O. Box Number is Not Acceptable)			
343 ALMERIA AVE CORAL GABLES FL 33134				ļ			
			83	1			
			84	City		FI	85 Zip Code
				<u> </u>	ioration submits this statement for the pure		noing its registered offi
12.	Sgrabio, tyra cripintatra v ofny tendajir OFNCERS AN	ND DIRECTORS	13.	· r	ADDiTIONS/OHANGES TO OFF		DiRECTORS IN 12 Change   Addition
TITLE	P	☐ DELETE	1 \$ TIFLE			L.	Tourunds C7 yequin i
NAME	LOCKE, C. THOMAS		1.2 NAME		·		
STREET ADDRESS	5440 S.W. 148 PLACE			TADDRESS			
CITY - ST - ZIF	MIAMI FL 33185	C DE FE	1.4 CITY -		V/D		Change Addition
TITLE		☐ DELETE	2 1 1/11/16		AL AGRAWAL	L	7 <b>&gt;</b> -4
NAME			2.2 NAME	1		Place	
STREET ADDRESS				LADDRESS	7440 F.W. 148	3 184	-
CITY-ST-ZIP		[] DELETE	2.4 C-TY - 3. 1.1/1LE				Change 🔲 Addition
TITLE		L., Dittie	3.2 NAME	1			
NAME				F1 ACORESS			
STREET ADDRESS			3 4 CITY		000	001	943030 1946—9944
CITY - ST - ZIP TITLE		DELFTF	4 1 lilul		-09/10	)/960	<b>1046004</b> ddillor
NAME			4.2 NAM		****	25.00	****225.00
STREET ADDRESS			4.3 STRE	EL ADDRESS			
CITY-ST-ZIP			4.4 Cil y	- ST - ZIP		<u></u>	
TIFLE		☐ D€LETE	5 1 010	E		[	Criange Addition
, NAME			5.2 NAM	E .			
STREET ADDRESS			53STRE	ET ADDRESS	$\wedge$		
CITY-S1-ZIP			5.4 C+TY	- \$1 - ZIF		$\mathcal{V}_{\mathcal{A}}$	The Change Addition
TITLE						717	
NAME		DELETE	6 1 1151	F	U. J. a	100	Change Addition
		[] DELETE	6.2 NAM	ī	J. W.	196	ChangeA36.10
STREET ADDRESS		[] DELEIE	6.2 NAM		9/3	396	Change Addition
STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.2 NAM 6.3 STRE 6.4 COLY	ET ADURESS - ST- ZIP	G / 3		

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 logal effect as if made under cath; 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 for on an attachment with an address.

SIGNATURE: (AL AGRAWAL) 7/27/96 305-552-1578.