

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000060996 (2)**

1. Corporation Name

**ALTONA, USA, INC.**



Principal Place of Business

~~12361 S.W. 144TH TERRACE  
MIAMI FL 33186~~

Mailing Address

~~12361 S.W. 144TH TERRACE  
MIAMI FL 33186~~

2. Principal Place of Business

21 **14585 SW 123 AVE**

State, Apt. #, etc.

22 City & State

23 **MIAMI FL**

24 **33186** 25 **US**

2a. Mailing Address

26 **14585 SW 123 AVE**

State, Apt. #, etc.

27 City & State

28 **MIAMI FL**

29 **33186** 30 **US**

3. Date Incorporated or Qualified

**08/08/1995**

3a. Date of Last Report

4. FEI Number

**15-0606321**

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 intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

**GOTTLIEB, SHELDON L  
40700 NORTH KENDALL DRIVE  
SUITE 203  
MIAMI FL**

10. Name and Address of New Registered Agent

81 Name **ISSELT, JOHNNY E**  
82 Street Address (P.O. Box Number is Not Acceptable) **14585 SW 123 AVE**  
83  
84 City **MIAMI** 85 Zip Code **FL 33186**

11. Pursuant to the provisions of Sections 607.0602 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 obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

*[Signature]*

DATE

**02/09/96**

12. OFFICERS AND DIRECTORS

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY-ST-ZIP	<input type="checkbox"/> DELETE
<del>PS</del>	<del>ISSELT, TEQUILLA</del>	<del>12361 S.W. 144TH TERRACE</del>	<del>MIAMI FL 33186</del>	<input checked="" type="checkbox"/>
VT	ISSELT, TEQUILLA	12361 S.W. 144TH TERRACE	MIAMI FL 33186	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Add-on
PS	ISSELT, JOHNNY E	14585 SW 123 AVE	MIAMI, FL 33186	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 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 Book 12 or Book 13 if changed, or on an attachment with the address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02/09/96**

**305.234.0880**  
DATE OF FILING

CR2E034 (12/95)