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FILED
Mar 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000049839 (9)

1. Corporation Name:
BIRD CAGE U.S.A. INC.



Principal Place of Business: **14410 SW 197 AVE. MIAMI FL 33196**

Mailing Address: **14410 SW 197 AVE. MIAMI FL 33196-2222**

3. Date Incorporated or Qualified: **06/10/1996**

3a. Date of Last Report

2. Principal Place of Business: **8590 SW 40 St.**

2a. Mailing Address: **8590 SW 40 St.**

4. FEI Number: **65-0678503**

Applied For: Not Applicable

22. City & State: **Miami FL**

27. City & State: **Miami FL**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

23. Zip: **33159** Country: **DADE**

28. Zip: **33155** Country: **DADE**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

9. Name and Address of Current Registered Agent:
MALLORY, JAY D
14410 SW 197 AVE.
MIAMI FL 33196

10. Name and Address of New Registered Agent

81. Name: **Ivette M. Singer**

82. Street Address (P.O. Box Number is Not Acceptable): **14410 S.W 197th Ave**

83.

84. City: **Miami** State: **FL** 85. Zip Code: **33196**

11. Pursuant to the provisions of Sections 607.0501 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Ivette M. Singer* DATE: **3/4/97**

(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> DELETE
NAME	IVETTE M. Singer	
STREET ADDRESS	14410 S.W 197th Ave	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	Vice-President	<input type="checkbox"/> DELETE
NAME	Jay Mallory	
STREET ADDRESS	8811 SW 123rd Ct # 211	
CITY-ST-ZIP	Miami FL 33165	
TITLE	Secretary/Treasurer	<input type="checkbox"/> DELETE
NAME	Ken Singer	
STREET ADDRESS	14410 S.W 197th Ave	
CITY-ST-ZIP	Miami FL 33184	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 attachment with an address.

SIGNATURE: *Ivette M. Singer* DATE: **3/4/97** DAYTIME PHONE: **225-8484**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)