

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

FILED

**Apr 21 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000069920 (2)
 1. Corporation Name
P.S.M. (U.S.A.), INC.



Principal Place of Business 888 SE 3RD AVE. SUITE #400 FT LAUDERDALE FL 33316	Mailing Address 888 SE 3RD AVE. SUITE #400 FT LAUDERDALE FL 33316-1181
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2. Principal Place of Business 21 2255 GLADES ROAD Suite, Apt. #, etc. 22 SUITE 324A City & State 23 BOCA RATON, FL. Zip 24 33431 Country 25 U.S.A.		2a. Mailing Address 26 2255 GLADES ROAD Suite, Apt. #, etc. 27 SUITE 324A City & State 28 BOCA RATON, FL. Zip 29 33431 Country 30 U.S.A.		3. Date Incorporated or Qualified 08/22/1996	3a. Date of Last Report -
4. FEI Number 65-0689900		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent LARRY J. BEHAR, P.A. 888 SE 3RD AVE, SUITE #400 FT LAUDERDALE FL 33316				10. Name and Address of New Registered Agent			
81 Name ALBERT ABITBOL		82 Street Address (P.O. Box Number is Not Acceptable) 2255 GLADES ROAD SUITE 324A		83		84 City BOCA RATON	
85 State FL		86 Zip Code 33431		87		88	

11. Pursuant to the provisions of Sections 607.0507 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 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **ALBERT ABITBOL** DATE: **APRIL 14, 1997**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	P. J. ALBERT ABITBOL			
NAME		1.2 NAME		2255 GLADES ROAD SUITE 324A			
STREET ADDRESS		1.3 STREET ADDRESS		BOCA RATON, FL 33431			
CITY-ST-ZIP		1.4 CITY-ST-ZIP		S DANIEL ABITBOL			
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	14400 ELLA BLVD. APT. 241			
NAME		2.2 NAME		HOUSTON TX 77014			
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		2.4 CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4 CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		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 person 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 if my appointment with an address.

SIGNATURE: *[Signature]* **ALBERT ABITBOL** DATE: **MARCH 14, 1997** (561) 989 3238

CR2E034 (9/96)