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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000087174

ZAKINTHOS USA, INC.

Principal Place of Business	Mailing Address
501 BRICKELL KEY DRIVE #407	501 BRICKELL KEY DRIVE #407

## May 05, 1999 8:00 am Secretary of State

05-05-1999 90127 017 \*\*\*150.00

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501 BRICKELL KE	EY DRIVE #407		KELL KEY DRIVE #4	07		
MIAMI FL 33131		MIAMI FI	_ 33131			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						10/12/1998
2. Principal Plac	ce of Business	2a. Mail	ing Address			4. FEI Number Applied For
<u> </u>	55 57 <b>2</b> 20555	26	J			65-0905436 Not Applicable
21 ~ Suite, Apt. #,	etc		e, Apt. #, etc.			\$8.75 Additional
	, 616.	27	4, 1, 1, 4, 1, 1			5. Certifcate of Status Desired Fee Required
City & State	<del></del>		& State			6. Election Campaign Financing \$5.00 May Be
		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Zip Country		<u> </u>	This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax.  Yes No
24	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
	3. Italie alla Addicas C. Calif	g		81	Name	
HESS.	THOMAS J ESO.			<u> </u>	<u> </u>	
	RICKELL KEY DRIVE #407			82	Street	Address (P.O. Box Number is Not Acceptable)
	FL 33131			83	<del>-</del>	
14117-0411	12 00 101			100	1	
	$\bigcirc$			84	City	FL 85 Zip Code
					L	· —   ·
11. Pursuant to	the provisions of Sections 607.05	502 and 607.15 re of Florida. Su	i08, Florida Statutes, ich change was auth	the abov orized by	/e-named / the corp	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent + am	familiar with, and accept the oblig	gations of, Sect	ion 607.0505, Florid	a Statute	S.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	100	THOMA	ts H <del>ess</del>			3/1/99.
S	Ignature, typed or printed name of registered a				ent signature r	
12.	OFFICERS A	AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			☐ DELETE	1.1 TITLE		
NAME				1.2 NAME		GERARDO A. VAZQUEZ, ESQ. 402
STREET ADDRESS				1.3 STREE	T ADDRESS	
CITY-ST-ZIP				1.4 CITY-	ST-ZIP	miam: ,FL. 33131
TITLE			☐ DELETE	2.1 TITLE		PRESIDENT Change Addition
NAME			!	2.2 NAME		DANIEL KASSAR
STREET ADDRESS				2.3 STREE	T ADDRESS	501 BRICHELL KEY DINE, STE 407
CITY-ST-ZIP	<del>-</del> .			2.4 CITY-	ST-ZIP	MIAMI EL 33131
TITLE			☐ DELETE	3.1 TITLE		DIRECTOR Change Addition
NAME				3.2 NAME		DANIEL KASSAB
STREET ADDRESS				3.3 STREE	ET ADDRESS	SQI BRICKELL KEY DAIVE, STE 407
CITY-ST-ZIP				3.4. CITY-	ST-ZIP	mran, =2. 33131
TITLE			DELETE	4.1 TITLE		Change Addition
NAME				4, 2 NAMS	:	
				9	Et address	
STREET ADDRESS	*			4.4 CITY-	-	1
CITY-ST-ZIP	<del></del>		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
TITLE				5.1 TILE 5.2 NAME		
NAME					ET ADDRESS	
STREET ADDRESS						
CITY-ST-ZIP	. <u> </u>		C per Fre	5.4 CITY- 6.1 TITLE		☐ Change ☐ Addition
TITLE			☐ DELETE			[] Change [] Addition
NAME	$\wedge$			6.2 NAME		
STREET ADDRESS	$\sim 10^{\circ}$				ET ADDRESS	8
OTT OT THE	' 1/1	•		6.4 CITY-	ST-ZIP	

14. I 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 of 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 sharped or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

GERANDO A. VATOUEZ

SECRETAR