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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L07396

(9)

FINOTEX U.S.A. CORP.

FILED Apr 23 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 6942 N.W. 50TH ST. 2665 S BAYSHORE DR MIAMI FL 33166 SUITE 902 DO NOT WRITE IN THIS SPACE MIAMI FL 33133 3. Date Incorporated or Qualified 08/08/1989 Applied For 2. Principal Place of Business Mailing Address 21 26 Not Applicable 65-0135546 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intargible Personal Property Tax due June 30. Yes No Ζiρ Country Zip 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ORTIZ, MICHAEL 2665 S. BAYSHORE DR. Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 902 83 MIAM! FL 33133 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of ingestired agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME **SLEBI, CARLOS YIDI** 1.2 NAME 6942 N.W. 50TH ST. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 2.1 TITLE QUINTERO, ANDRES YIDI NAME 2.2 NAME STREET ADDRESS 6942 N.W. 50TH ST. 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE QUINTERO, CARLOS YIDI 3.2 NAME NAME 6942 N.W. 50TH ST. STREET ADDRESS 3.3 STREET ADDRESS miami fl CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME QUINTERO, WILLIAM YIDI 4. 2 NAME 6942 N.W. 50TH ST. STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP City-St-ZiP

14. I hereby certify that the information supplied with this filling 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 armual 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.

1/9/98