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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortharp

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(4)

S. DANOFF U.S.A. LIMITED, INC.

FILED May 11 1998 8:00am Secretary of State

Principal Place				{	1881 11810 11814 11814 11814 11814 11814 11814 11814 11814 11814 11814 1				
2828 CORAL STE 309		Mailing Address 2828 CORAL WAY STE 309			DO NOT MIDITE	E INI THIC CO	∧ ∩E		
Miami FL 331 US	145	MIAMI FL 33145 US	MIAMI FL 33145			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
•••		00				02/21/1979			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26				59-1900846			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.						\$8.75	Additional
22		27			5. Certificate of Status Desired		Fee Re	equired	
City & State	9	City & State				6. Election Campaign Financing		\$5.00	Мау Ве
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	25 25 Name and Address of Currel	29 Agent	30			Personal Property Tax due June 10. Name and Address of New Re			7) 140
DA				1 Na	me	10, realis and Addition of the life	giotorou rig		
DANOFF,STUART 2828 CORAL WAY									
STE 309				32 Str	treet Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33145				33					
****	_					·			
	Ω			34 Cit	-		₽Ł∣	· `	Code
11. Pursuant	to the provisions of Spotions 607.050	2 and 607 1508, Florida Statu	ites, the abo	ove-nan	ned corp	oration submits this statement for the p ion's board of directors. I hereby accep	ourpose of ch	nanging it	ts registered
agent. La	m familiar with and accept the oblig	ations of Section 607.0505, F	lorida Statul	tes.	corporati	on's board of directors. Thereby accep	pt the appoin	unent as	registered
SIGNATURE		STU	ART S.	DAN	OFF	CEO/DIRECTOR	15 AP		
· · · · · · · · · · · · · · · · · · ·	Signature, typed in printed other department ago OF FICERS AN	ontend of the policina (NO	TE Registered A	Agent sign	ature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE		
12. TITLE	CEO	DELETE	13.	F	\top	ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	DANOFF, STUART		1.2 NAM	-			_	,	
STREET ADDRESS	2828 CORAL WAY, STE. 309			EET ADDRE	22				
CITY-ST-ZIP	MIAMI FL		•	-\$T-ZIP					
TITLE				2.1 TIFLE				Change	Addition
NAME	MERLIN, MICHELLE		22 NAME						
STREET ADDRESS	2828 CORAL WAY, STE 309		2.3 STREET ADDRESS		SS				
CITY-ST-ZIP	MIAMI FL		2.4 CITY	Y-ST-ZIP					
TITLE	STD DELETE			E			L] Change	Addition
NAME	DANOFF, ZITA		3.2 NAM		ŀ				
STREET ADDRESS	2828 CORAL WAY, STE 309			EET ADORI	SS				
CITY-ST-ZIP	MIAMI FL	DELETE		Y-ST-ZIP				Change	Addition
TITLE NAME	,	L. VELETE	4 1 TITLI 4.2 NAN			+	<u> </u>	1 cusuas	L VOOHINA
				al Eet addri	-00				
STREET ADDRESS					:55				
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	-ST-ZIP			Г	Change	Addition
NAME			5.2 NAM						
STREET ADDRESS	•			EET ADDRE	ss				
CITY-ST-ZIP			i i	-\$T-7IP	-				
TITLE		DELETE	6.1 TITE				L.	Change	☐ Addition
NAME			6.2 NAM	tE .					
STREET ADDRESS			6 3 STRE	EET ADORE	ss				
CITY-ST-ZIP				-ST-ZIP					
14. I hereby 0	certify that the information supplied v	rith this filing does not qualify at annual report is true and an	for the exen	nption s	stated in	Section 119.07(3)(i), Florida Statutes. I	further certif	y that the	information
officer or	director of the corporation or the rec	eiver or trustee empowered to	execute thi	is repor	t as requ	re shall have the same legal effect as it uired by Chapter 607, Florida Statutes;	and that my	name ap	pears in
DIOCK 12	or block to recharppool (A) on an area	omyony with all acciress							