#### 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000086621

Entity Name: USA INDUSTRIAL OPPORTUNITIES FUND CO

**FILED** Apr 25, 2023 **Secretary of State** 5200693719CC

ARTILES, JOSE MIGUEL JR.

## **Current Principal Place of Business:**

1401 N UNIVERSITY DRIVE, STE 501 CORAL SPRING, FL 33071

### **Current Mailing Address:**

1401 N UNIVERSITY DRIVE, STE 501 CORAL SPRING, FL 33071 US

FEI Number: 87-2959122 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CARMONA & ASSOCIATES, INC. 7270 NW 12 STREET SUITE 645 MIAMI, FL 33126 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EMERSON CARMONA 04/25/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title CHAIRMAN, NON EXECUTIVE Title HEAD OF HUMAN RESOURCES

> DIRECTOR Name

ARTILES, JOSE MIGUEL Name

Address 1401 N UNIVERSITY DRIVE, STE 501 Address 1401 N UNIVERSITY DRIVE, STE 501

CORAL SPRING FL 33071 City-State-Zip: City-State-Zip: CORAL SPRING FL 33071

Title CEO

Title VC. CEO Name MODAFFERI, GIOVANNI

Name PASTORE, FABIO Address 77 YORK STREET

Address VIA TIBURTINA 216 BEDFORD BEDFORDSHIRE City-State-Zip:

City-State-Zip: ROMA ITALY 00157 MK403RN

Title **HEAD OF INTERNAL AUDIT** Title HEAD OF BUSINESS BANKING

Name BULENT, OSMAN Name PEROZZI, SALVATORE

Address 117 LEAVES GREEN ROAD Address VIA GENERALE

> DALLA CHIESA 2 KESTON KENT BR26DG City-State-Zip:

City-State-Zip: DESENSANO GARDA ITALY 25015

HEAD OF LEGAL DEPARTMENT Title Title DIRECTOR, SECRETARY

Name MUSCOGIURI, NICOLA Name MORICI, ALBERTO 1401 N. UNIVERSITY DR Address

Address 1401 N. UNIVERSITY DR SUITE 501

SUITE 501 City-State-Zip:

CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 City-State-Zip:

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOSE MIGUEL ARTILES 04/25/2023 D

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title CFO

Name ALVARES, MANUEL ANTONIO

Address 1401 N UNIVERSITY DRIVE

STE 501

City-State-Zip: CORAL SPRINGS FL 33071