

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90216 019 ***150.00

DOCUMENT # F93000005749

1. Entity Name
CONTI - U.S.A., INC.



Principal Place of Business
**1800 ELLER DR
STE 555
FT LAUDERDALE, FL 33316 US**

Mailing Address
**601 BRICKELL KEY DRIVE
STE 805
MIAMI, FL 33131**

94073757



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1441 BRICKELL AVE. SUITE 1014

03302004

Chg-P

CR2E034 (10/03)

City & State

City & State

MIAMI FL

4. FEI Number

65-0455301

Applied For

Not Applicable

Zip

Country

Zip

33131

Country

U.S.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALLEN & GALEGO
601 BRICKELL KEY DRIVE
SUITE 805
MIAMI, FL 33131**

Name

ROBERT ALLEN LAW

Street Address (P.O. Box Number is Not Acceptable)

1441 BRICKELL AVE. SUITE 1014

City

MIAMI

FL

Zip Code

33131

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

by: **Robert N. Allen Jr. PRESIDENT** **4-29-04**

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
NAME **BRION, JEAN-FREDERIC**
STREET ADDRESS **601 BRICKELL KEY DRIVE, SUITE 805**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **P** ☒ Change ☐ Addition
NAME **BRION, JEAN-FREDERIC**
STREET ADDRESS **1441 BRICKELL AVE. 1014**
CITY-ST-ZIP **MIAMI - FL, 33131**

TITLE **VPS** ☒ Delete
NAME **CUSTERS, ANITA**
STREET ADDRESS **601 BRICKELL KEY DRIVE, SUITE 805**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **VPS** ☒ Change ☐ Addition
NAME **CUSTERS, ANITA**
STREET ADDRESS **1441 BRICKELL AVE. SUITE 1014**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **SS** ☒ Delete
NAME **ALLEN, ROBERT N JR**
STREET ADDRESS **601 BRICKELL KEY DRIVE, SUITE 805**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **SS** ☒ Change ☐ Addition
NAME **ALLEN, ROBERT N. JR**
STREET ADDRESS **1441 BRICKELL AVE. SUITE 1014**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **VP** ☒ Delete
NAME **WOLFGANG, TEUCHERT**
STREET ADDRESS **601 BRICKELL KEY DRIVE, SUITE 805**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **VP** ☒ Change ☐ Addition
NAME **WOLFGANG, TEUCHERT**
STREET ADDRESS **1441 BRICKELL AVE. SUITE 1014**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert N. Allen Jr.

4-29-04

305-3723700

Date

Daytime Phone #