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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500002833 (0)

USA SYSTEMS GROUP, INC.

Principal Place of Business

Mailing Address

FILED

Feb 09 1998 8:00am

Secretary of State

	ace of Business And St. Betc.	P.O. BOX 2740 SARASOTA FL 34230 2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip	Country		DO NOT WRITE IN THI 3. Date Incorporated or Qualified 06/12/1995 4. FEI Number 59-3216281 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	\$8.75 Fee F \$5.00	Applied For Not Applicable Additional Required D May Be I to Fees
24 34236 25 29		—	, ' 		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No		
24/07/00	9. Name and Address of Current		100,		10. Name and Address of New Registers		
MII	LER, H LINCOLN	7. 2,444	81	Name	9		
773 ST. JUDES DRIVE N			82	Street	t Address (P.O. Box Number is Not Acceptable)		
LONGBOAT KEY FL 34228				01,001	(to box trained to tot toppass)		
			63				
			84	City		85 Zip	Code
44.5		10074100 51 11 01		_	F		i
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 prefind name of registered agent and tible if applicable (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	C	DELETE	1.1 TITLE			Change	Addition
NAME	MILLER, H. LINCOLN		1.2 NAME				i
STREET ADDRESS	773 ST. JUDES DRIVE NORTH		1.3 STREET				
CITY-ST-ZIP TITLE	LONGBOAT KEY FL DS	DELETE	1.4 CITY-5 2.1 TITLE	T-ZIP	+~	Change	☐ Addition
NAME	MILLER, MARGARET	L.J Dett it	2.1 TITLE 2.2 NAME		D	FET CHRUNC	ADGIRBA
STREET ADDRESS	773 ST. JUDES DRIVE NORTH		23 STREET	ANNOCCO	. \		. }
CITY-ST-ZIP	LONGBOAT KEY FL		2. 4 CITY-				
TITLE	DV	DELETE	3.1 TITLE	31-211	DYS	Change	Addition
NAME	MILLER, KURT		3.2 NAME		• • • • • • • • • • • • • • • • • • •	•	
STREET ADDRESS	1232 PALM PLACE DRIVE, NE		3.3 STREET	ADDRESS			1
CITY-ST-ZIP	PALM BAY FL		3.4. CITY-	ST-ZIP	Bradener FL 34209		
TITLE	DP	☐ DELETE	4.1 TITLE			Change	Addition
NAME	MOBAREKEH, MASSOUND M.		. 4.2 NAME				
STREET ADDRESS	4687 SAN SIRO DR.		4.3 STREET	ADDRESS	i		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-5	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME	****			1
STREET ADDRESS			5.3 STREET		· 		. {
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S 6.1 TITLE	11 - ZIP		Change	Addition
NAME		breen	6.2 NAME			0.12.190	- 1001(1011
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S				ŀ
	adify that the information complied wit	this filing does not qualify			ted in Section 110 07/2\/3\ Florida Statutos I further	andifuthat th	n information

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 suppliermental 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 changed, or on an attachment with an address.

SIGNATURE:

Kus Mills

1/20/98

941-955-1294