2001 UNIFORM BUSINESS REPORT (UBR)					FILED May 21, 2001, 9:00, am			
DOCUMENT # H28716 1. Entity Name					May 21, 2001 8:00 am Secretary of State			
	RPRISES USA INC.				04-28-2001 9	•		
Principal Place of Busines	55	Mailing Address						
600 no island Golden BCH. Fl. 33160 US		600 no island Golden BCH, Fl. 33160 Us			49307			
2. Principal Place of Business 402. NE 25 TH RVF. Suite, Apt. #, etc.		3. Mailing Address 902.NE 25 DVE. Suite, Apt. #, etc.		,	DO NOT WRITE IN THIS SPACE			
City & State City & State City & State Hallandal E. Brach, FL. Hallandal E. Br					59-2623959		Applied For	
Zip 33009	Country BROWARD	Zip 33009	Country BRO-107	3C) 5	Certificate of Status Desired [\$8.75 Ac	kritional	
	and Address of Current Re		Name		Name and Address of New Regis	tered Agent		
SIMON, ARNOL	D G		m A		Box Number is Not Acceptable)			
6240 SW 56 CT	90	Z NE	25 Ave					
DAVIE FL 33314	•	·	-					
			AH	ACINAL	LE BEACH.	FL Zip Co	889	
SIGNATURE Signature, typed	or printed name of registered agent and ible to satisfy its Intangible	r	Registered Agent signal			2 0 - DATE 0 -		
Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 20 Make Check Payat			1 Fee will be \$550.00 to Department of State		10. Election Campaign Financing Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
II.	- OFFICERS AND DI	Delete	12.	P	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR		
GROSS, I GROSS 600 N ISL	AND DR.		NAME STREET ADDRESS CITY-ST-ZIP	902.	; mark a. n.e 25 ave ndale, Beach, Fl.	7744	CR2E034 (10/00)	
TILE VTS GROSS, (GROSS, (GROSS, (GROSS, 2 GROSS, (GR	GLORIA V. AND DR.	☐ Delete	TITLE MAME STREET ADDRESS CITY-ST-ZIP	VTS GROS	S Gloria V. JE 25 TI AVE. MORLE BEACH, FR.	Change	Addition	
ITLE AME , IREET ADDRESS TY-ST-ZIP		□ Dèlete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		en e	Change"	Addition -	
TLE AME REET ADDRESS FY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TLE ME REET ADDRESS IY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TLE ME REET ADDRESS 'Y-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
	chment with an address, with		ne exemption state signature shall he required by Cha	ed in Section ave the same pter 607, Flo	119.07(3)(i), Florida Statutes, I furthe legal effect as if made under oath; I rida Statutes; and that my name appears to the legal of the legal effect as if made under oath; I rida Statutes; and that my name appears to the legal of the legal effect of the legal eff	er certify that the innat I am an officer ears in Block 11 or	of director Block 12 if	