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

CITY-ST-ZIP

SIGNATURE:

FILED FLORIDA DEPARTMENT OF STATE CORPORATION Jan 29 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS Secretary of State DOCUMENT #

1. Corporation Name J83227 (5)INTERMARKET USA, INC. Principal Place of Business Mailing Address 19591 N.E. 10TH AVE 19591 N.E. 10TH AVE BAY 3 RAY F DO NOT WRITE IN THIS SPACE NO. MIAMI BEACH FL 33179 NO MIAMI BEACH FL 33179 LIS 3. Date Incorporated or Qualified 07/20/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 <u>65:0005891</u> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 29 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 RIVERA, GLADYS H 19591 N.E. 10TH AVE Street Address (P.O. Box Number is Not Acceptable) BAY E NO MIAMI BEACH FL 33179 City 85 Zip Code 11. 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 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 printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition TITLE 1.1 TITLE Change CLEMANSON, JEAN NAME 1.2 NAME 19591 NE 10TH AVE, BAY E STREET ADDRESS 1.3 STREET ADDRESS N MIAMI BCH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE NAME OUJEVOLK, MAURICE 2.2 NAME STREET ADDRESS 19591 NE 10TH AVE, BAY E 2.3 STREET ADDRESS CITY-ST-ZIP <u>N MIAMI BCH FL</u> 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition BLOCH, ETIENNE NAME 3.2 NAME STREET ADDRESS 19591 NE 10TH AVE, BAY E 3.3 STREET ADDRESS N MIAMI BCH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. 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 annual report or supplemental 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 for on an attachment with an address.

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(302)621-8887