FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J95390 (7)

1. Corporate Name

UNITED STATES OF AMERICA MARKETING CORPORATION

Principal Place of Business

9858 GLADES ROAD
SUITE 183
BOCA RATON FL 33434

Mailing Address

9858 GLADES ROAD
SUITE 183
BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1987

3a. Date of Last Report: 04/15/1994

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. # or — 22

Suite, Apt. # or — 27

City, State — 23

City, State — 28

24 — 25 — 29 — 30

4. FEI Number: 65-0078506 ☐ Applied For ☐ Not Applicable

5. Certificate of Good Standing ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. [illegible] Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ROSENBERG, SAMUEL
9858 GLADES RD # 183
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name

82 Street Address, P.O. Box Number is Not Acceptable

83

84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section [illegible] Florida Statutes, this document also constitutes notice of the address of the registered office and the registered agent's name and address effective on the date this document was filed by the Department of State. I hereby accept the appointment as registered agent and am familiar with and accept the obligations of that position.

SIGNATURE

12.

DP
ROSENBERG, SAMUEL
9858 GLADES RD #183
BOCA RATON FL

13. ADDITIONAL OFFICER/DIRECTOR

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report, including any attached additional page(s), is true and accurate. I further certify that this report is executed in accordance with Florida Statutes, and that the corporation is not dissolved or inactive. I understand that the signature below constitutes prima facie evidence that this report is executed in accordance with Florida Statutes, and that my signature below constitutes my resignation as registered agent, if applicable.

SIGNATURE: [signature] 4/24/95 407 451-2600

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Samuel Rosenberg

0202032 CP