

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

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # K24556**

1. Corporation Name  
**USI CORP.**

Principal Place of Business  
3343 W. COMMERCIAL BLVD., SUITE #103  
FT. LAUDERDALE FL 33309

Mailing Address  
3343 W. COMMERCIAL BLVD., SUITE #103  
FT. LAUDERDALE FL 33309

[REDACTED]

01-23-99 900300 014 168.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
26	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
27	27
City & State	City & State
28	28
Zip	Zip
Country	Country
29	30

3. Date Incorporated or Qualified	4. FEI Number	Applied For
05/18/1988	65-0081371	Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution	7. This corporation owes the current year Intangible Personal Property Tax.
<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	<input type="checkbox"/> \$5.00 May Be Added to Fees	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

8. Name and Address of Current Registered Agent

**FRANCE, MICHAEL J.  
575 NORTHWEST 98TH AVE  
PLANTATION FL 33324**

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
France, Michael J.	3343 West Commercial Blvd., Suite 103		Ft. Lauderdale	FL 33309

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 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: Michael J. France DATE: 04/15/99

12. OFFICERS AND DIRECTORS		DELETE
TITLE	FRANCE, MICHAEL J.	<input checked="" type="checkbox"/>
NAME	12180 NW 28 CT	
STREET ADDRESS	PLANTATION FL 33322	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	D, CEO + President	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	FRANCE, MICHAEL J.		
1.3 STREET ADDRESS	12180 NW 28 Court		
1.4 CITY-ST-ZIP	Plantation, FL 33322		
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael J. France DATE: 04/15/99 (954) 486-5500

**SIGNATURE REQUIRED**  
Director + CEO

CR2E034 (11/98)