## 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 #

(8)

MARUWA (U.S.A.), INC.

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FILED

Jan 21 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address							
1428 BRICKELL AVE #106 MIAMI FL 33131		290 NW 165TH ST PLAZA 700 MIAMI FL 33169				DO NOT WRITE IN THIS	S SPACE
		U\$				3. Date Incorporated or Qualified 07/08/1988	
2. Principal Pl	ace of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For
1		25				65-0068868	Not Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & State	City & State			8. Election Campaign Financing	\$5.00 May Be
3		28	28			Trust Fund Contribution	Added to Fees
Zip	Country	Country Zip Co		untry	1try 6. This corporation owes or has paid the current year Intangible		urrent year Intangible
4	25	29	30	30		Personal Property Tax due June 30.	Yes 🗌 No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
HALPRYN ERNEST M				81	Name		
1428 BRICKELL AVE, STE 105 MIAMI FL 33131				82	Street Address (P.O. Box Number is Not Acceptable)		
****	( 5 55 15 )			83			
				84	City	FI	85 Zip Code
office or re	o the provisions of Sections 607 agistered agent, or both, in the S in familiar with, and accept the c	state of Florida. Such chai	nge was authorize	d by	the corporat	poration submits this statement for the purpose it ion's board of directors. I hereby accept the ap	of changing its registered pointment as registered

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE Change TITLE 1.1 TITLE Addition LABIANCA, PHILIP 1.2 NAME 1428 BRICKELL AVE, SRE 105 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP VPD DELETE Addition TITLE 2.1 TITLE DEVECCHI, JOHN NAME 2.2 NAME 1428 BRICKELL AVE, STE 105 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP AS DELETE Change 3.1 TITLE Addition TITLE WEISBERG, ALAN JAY 290 NW 165TH ST, PLAZA 700 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST-ZIP TITLE PD DELETE 4.1 TITLE Change Addition HALPRYN, ERNEST M. 4. 2 NAME 1428 BRICKELL AVE, STE 105 STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 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

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 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.

SIGNATURE:

(305)949-4955