FILE NOW: FILING FEE A	FTER MAY 1 IS \$	225.00	_	
PROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTME Sandra B. Mo Secretary of DIVISION OF COR	ortham State		
DOCUMENT # L 05130 1. Corporation Name Garcia USA, Inc.				
Principal Place of Business Repart M. Cummings Green St. P.O. Box 6166 Holliston, MA 01746	Mailing Address % Paul M. Cum 9 Green St. P.O. Box 6166 Holliston, MA	-	07/26/89 05	e of Last Report
2. Principal Place of Business	2a. Mailing Address 26 P.O. Box 61	66	4. FEI Number 65 - 0140523	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State 28 Holliston,	MA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25	21ρ 29 01746 30	Country	8. This corporation has liability for intangible t Florida Statutes X Yes \(\sum \cong No	
9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
Cummings, Paul M. 1428 Brickell Ave 4th Floor Miami, FL 33131		82 Street Addr8384 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid familiar with, and accept the obligations of, Section 1.		ne above named corpo y the corporation's boa		nanging its registered office is registered agent. I am
Signature goed or printed harve of registers in agent a	a) maj maj ji abaa (Ne Yili R	.getarad Ágért sig setem region	el characteristatispi DATE	
12. OFFICERS AND TILE DPC NAME Garcia, Ramon STREET ADDRESS 108 Pleasant St.		13. 1 1 1 III.E 1 2 NAME 1 3 STHEET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
CITY-SI-ZIP Millis, MA TITLE DTV	☐ DELETE	1.4 CITY-ST 7IP 2.1 TIFEE		Change Addition
SIREE ADDRESS 70 Grove St.	`•	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - SI- Z-P		
CHY-SI-ZIP Millis, MA THE S NAME Glynn, Anna G.	☐ DELETE	3 1 TITLE 3 2 NAME		Change Addition
STREEI ADDRESS 134 Lincoln St. CITY-ST-ZiP Franklin, MA IIILE AS	☐ DELETE	33 STREET ADDRESS 34 CITY - ST ZIP 4 1 TI'LE		Change Addition
NAME Cummings, Paul M STREET ADDRESS 1428 Brickell AV		4.2 NAME 4.3 STREET ADORESS 4.4 CITY - ST- ZIP	0000018104	80 117
CITY-SI-ZIP Miami, FL	[] DELETE	5 1 MALE 52 NAME 53 STREET ADDRESS	***200.00	Change Addition
STREET ADDRESS		5 4 CITY-ST-ZIP		

6 1 T TLF

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

THILE

NAME

STREET ADDRESS

SIGNATURE AND TYPES OR PRINTED MANY OF SIGNING OFFICER OR DIRECTOR

TO THE ASSUMENT.

☐ DELETE

508-429-7400

Change Addition

CR2E034 (12/95)