FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
Jun 17 1997 8:00am
Secretary of State

DOCUMENT # L25506 (1)

1. Corporation Name
AGIV (U.S.A.), INC.

Principal Place of Business
~~129 W. 27TH STREET~~
~~NEW YORK NY 10001~~
~~US~~

Mailing Address
~~129 W. 27TH STREET~~
~~NEW YORK NY 10001-6206~~
~~US~~

3. Date Incorporated or Qualified: 10/26/1989
3a. Date of Last Report: 03/04/1996

2. Principal Place of Business
21 8750 NW 36TH ST #220
Suite, Apt. #, etc.
22 MIAMI
City & State
23 FL 33178
Zip 24 33178 Country 25 USA.

2a. Mailing Address
26 8750 NW 36TH ST #220
Suite, Apt. #, etc.
27 MIAMI
City & State
28 FL
Zip 29 33178 Country 30 USA

4. FEI Number: 65-0176797 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
~~RAMCHANDANI, SACHIN~~
~~129 W. 27TH STREET~~
~~SUITE 700~~
~~NEW YORK NY 10001~~
RAMCHANDANI SACHIN
KHAN TOUQEER,
8750 NW 36TH ST #220
MIAMI FL 33178

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 8750 NW 36TH ST #220
84 City MIAMI FL 85 Zip Code 33178

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 KHAN TOUQEER 6/12/97.
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	DEVNANI, VIJAY G.	
STREET ADDRESS	129 W. 27TH STREET	
CITY-ST-ZIP	NEW YORK NY	
TITLE	V	☐ DELETE
NAME	RAMCHANDANI, SACHIN	
STREET ADDRESS	129 W. 27TH STREET	
CITY-ST-ZIP	NEW YORK NY 10001	
TITLE	M	☐ DELETE
NAME	KHAN, TOUQEER	
STREET ADDRESS	129 WEST 27TH STREET	
CITY-ST-ZIP	NEW YORK NY	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☑ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	8750 NW 36TH ST #220	
1.4 CITY-ST-ZIP	MIAMI FL 33178	
2.1 TITLE		☑ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	8750 NW 36TH ST #220	
2.4 CITY-ST-ZIP	MIAMI FL 33178	
3.1 TITLE		☑ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	8750 NW 36TH ST #220	
3.4 CITY-ST-ZIP	MIAMI FL 33178	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☑ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

6/17/97

$ Ck Dp 173.75

14. I do 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.

SIGNATURE 6/12/97 305-418-8400

CR2E034 (9/96)