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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L55077

1. Corporation Nature

CALOI USA INC.

(6)

FILED May 05 1997 8:00am Secretary of State



| Principal Pa 703 E. ASHLE JACKSONMLU US | rce of Business Y \$T. E FL 32202 | 703 | Mailing Address 703 E. ASHLEY ST. JACKSONVILLE FL 32202-2507 US | | | | | | | |
|--|---|--|--|------------------------|---------------|---------------------------------------|--|------------|------------------------|--------------|
| | | | | | | | 3. Date Incorporated or Qualified 03/06/1990 | | te of Last R 7/1996 | eport |
| | Place of Business | —————————————————————————————————————— | Mailing Address | | | | 4. FEI Number | | | plied For |
| 21 | | 26 | . <u> </u> | | | | 59-2997919 | | ····· | t Applicable |
| Suite Ap | t # etc. | 27 | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 / Fee Re | |
| City & St | ate | | City & State | , | | | 6. Election Campaign Financing | | \$5.00 | |
| 23 | | 28 | • | | | | Trust Fund Contribution | | Added t | |
| Zipi | Country | | Zip | Country | y | | 8. This corporation has liability for i | ntangible | lax under s | 199.032, |
| 24 | 25 | 29 | | 30 | | | Florida Statutes | Yes [|] No | |
| | g, Name and Address of Cur | rent Regist | ered Agent | | | | 10. Name and Address of New Re | gistered / | .gent | |
| | GEN, THOMAS E | | | 81 | 1 | Name | | | | |
| | E ASHLEY ST. | | | 82 | 2 | Street Add | ress (P.O. Box Number is Not Acceptab | le) | | |
| JAC | CKSONVILLE FL 32202 | | | - | 1 | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | 83 | 1 | | | | | |
| | | | | 84 | † | City | | | 85 Zip (| Code |
| | | | | L | L | | poration submits this statement for the p tion's board of directors. I hereby accep | FL | | |
| SIGNATURE | | l agent and blu i | Lapplicable (NO | OTE Flogistered Aç | | | ired when reinstating) | DATE | | |
| 12. | OFFICERS | AND DIREC | DELETE | 13. | | | ADDITIONS/CHANGES TO OFFIC | EHS ANU | Change | Addition |
| HTLE NAME | CALOI, BRUNO ANTONIO | | | 1.1 TITLE 1.2 NAME | | ! | | | Unange | FT Addition |
| STREET ADORESS | AV CHIDO CALOL 4004 | | | 1.3 STREE | | ADDRESS | | | | |
| (91Y-\$1_74P | SAO PAULO, BRAZIL | | | 1.4 City- | | | | | | |
| 19101 | D | | DELETE | 21 TITLE | | | | | Change | Addition |
| NAME | CALOI, BRUNO ANTONIO, J | R | | 2.2 NAME | | Í | | | | |
| STREET ADDRESS | | | | 2.3 STREE | TA | ADDRESS | | | | |
| City St-750 | SAO PAULO, BRAZIL | | | 2. 4 CITY- | -s† | T-ZIP | | | | |
| 1046 | D | | DELETE | 3.1 TITLE | | | | | Change | Addition |
| MAME | CALOI, RICARDO | | | 3.2 NAME | | | | | | |
| STREET ADORES | | | | 3.3 STREE | T A | address | | | | |
| City-St 2P | SAO PAULO, BRAZIL | | F-1 KF/F | 3,4, CITY- | | T-ZIP | | | T 06: | |
| THE | D Messiano, Jose Vincenti | • | DELETE | 4.1 TITLE | | 1 | | | Change | Ll Addition |
| NAME | AU ALBOA CALAL 4004 | 5 | | 4. 2 NAME | | | | | | |
| STREET ADORESS | SAO PAULO, BRAZIL | | | 4.9 STREE | | - 1 | | | | |
| CHY-SI-7-P | V I NOLO, DIVELL | | ☐ DELETE | 4.4 CiTY- 5.1 TITLE | 51 | - 211 | | | Change | Addition |
| NAME | HAGEN, THOMAS | | - Vece, | 5.2 NAME | | | | | | .7 |
| SEREET ADDITION | TOO ACLUEV OT | | | 5.3 STREE | | ADDRESS | | | (Y | 1 /2 |
| Sintt FAOURIS | JACKSONVILLE FL 32202 | | | 5.4 CITY- | | i | | | \ \ | つく |
| Ta() | \$ | | DELETE | 61 TITLE | $\overline{}$ | · | 00000217 | na. | Clarge | Addition |
| NAME | CARTER, ANDREW C | | | 6.2 NAME | | | 00000217 -05/08/97010 | າ3ັກາ | ji 🖳 | |
| SIMET ACORES | 703 E. ASHLEY ST. | | | 6.3 STREE | TA | ADDRESS | ***165.00 | | | |
| Caly-ST 70h | JACKSONVILLE FL 32202 | | | 6 4 CITY - | ST- | - ZIP | | | | |
| | | 41 | | | | | 1 0 1 1 1 0 0 1 (O) (I) 5 1 1 O | 1.7 | 416 | 11 |

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 in dicated 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 eath; 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:

4-25-97

904-355-5547