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 # **L79354**

1. Corporation Name

GATEWAY GLOBAL (USA), INC.

Principal Place of Business	

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90249 014 ***150.00

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Principal Place	e of Business	Mailing Address			Ì					
14260 S.W. 136TH STREET. BAY 7 MIAMI FL 33186		14260 S.W. 136TH STREET. BAY 7 MIAMI FL 33186			DO NOT WRITE IN THIS SPACE					
					ļ <u>-</u>			IE IN THIS	SPACE	 _
					3.	Date Incorporate 06/07/1990	or Qualifed			·
2. Principal Pl	lace of Business	2a. Mailing Address			4	, FEI Number			^	Applied For
21 10485	NW 285T	26 10485 NW	285	7		65-0193 <u>6</u> 85				Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5	. Certifcate of State	us Desired			Additional Required
City & State	Δ	City & State				, Election Campaig	n Financina		\$5.00	May Be
23 Mi	AMI, FL	28 MIAM		FL		Trust Fund Contr	ibution		Added	to Fees
Zip	Country	Zip	_ Country	′	8	This corporation		ent year in	itangible	□No
24 3317		29 <i>33172</i> 30	0			Personal Propert			_/`\	
·	9. Name and Address of Curren	t Registered Agent	81	I &I		Name and Addr	ess of New F	tegistered	Agent	
MOR	OT-GAVDRY, ALAIN		01	Name	l					
	60 SW 136 ST #7		82	82 Street Address (P.O. Box Number is Not Acceptable)						
t				//	04 85	5 NW 2	8 5T·			
MIAN	/II FL 33186		83				,	•		
			84	City	MiA	mi		FL		Code
44 Burniant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statutes	the above	e-named	Corporation	on submits this stat	ement for the	purpose of	f changing if	ts registered
office or r	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida, Such channe was auth	norizea nv	the corp	oration's b	ooard of directors. I	hereby accep	ot the appo	intment as r	egistered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE. Re	egistered Age	nt signature	required when	reinstating)	 -	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHAP	IGES TO OF	FICERS A		
TITLE	DP	☐ DELETE	1.1 TITLE						Change	e 🗀 Addition
NAME	MOROT-GAUDRY, ALAIN		1.2 NAME							
STREET ADDRESS	14260 SW 136 ST #7		1.3 STREE	T ADORESS	1048	5 NW 2	8 57			ļ
CITY-ST-ZIP	MIAMI FL		1.4 CITY-5	ST-ZIP	MIA	mi FC	3 3/7	12-21	52	
TITLE	ST	☐ DELETE	2.1 TITLE			·			Change	Addition
NAME	MOROT-GAUDRY, ALAIN		2.2 NAME							. 1
STREET ADDRESS	14260 SW 136 ST #7		2.3 STREE	T ADDRESS	i Ind	e-NWZ2	7 S 7-			
\	MIAMI FL		2. 4 CITY-		100	85 NW ZZ	3717	J-2/5	- 2	h
CITY-ST-ZIP	THE WAR I L	☐ DELETE	3.1 TITLE		7-6-	7711.11.		<u> </u>	Change	● ☐ Addition
NAME			3.2 NAME						•	
			1	T ADDRESS	,					ļ
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TITLE			4. 2 NAME							_
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CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	11-ZIP	 				· Change	e
TITLE		□ perete	5.1 TILE 5.2 NAME		ļ	•				
NAME				TADDRESS		•			•	
STREET ADDRESS			5.4 CITY-1		Ί					ļ
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TITLE		☐ DELETE	4		1					, <u> </u>
NAME			6.2 NAME							
STREET ADDRESS				TADDRESS	5					ŀ
1)		6.4 CITY	T. 7ID	1					ŀ

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 of 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:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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