FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
97 APR 28 AM 6:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **L83438** **(6)**

1. Corporation Name
GUY SALMON USA, INC.

Principal Place of Business
110 S.E. 6TH STREET
28TH FLOOR
FT LAUDERDALE FL 33301

Mailing Address
~~C/O JOHN DAMIAN~~
~~P O BOX 22776~~
~~FT LAUDERDALE FL 33335-2776~~
~~US~~

3. Date Incorporated or Qualified: 06/25/1990
3a. Date of Last Report: 02/13/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26: 450 E. Las Olas Blvd.
Suite, Apt #, etc. — 22
Suite, Apt #, etc. — 27: Ste. 1200
City & State — 23
City & State — 28: Ft. Lauderdale, FL
Zip — 24
Country — 25
Zip — 29: 33301
Country — 30

4. FEI Number: 65-0200221 — 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
TRIPP, NORMAN D
TRIPP, SCOTT, CONKLIN & SMITH
110 SOUTHEAST SIXTH STREET, 28TH FLOOR
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name: CT Corporation System
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1200 S. Pine Island Rd.
84 City: Plantation FL
85 Zip Code: 33324

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: Connie Bryan — CONNIE BRYAN, SPECIAL ASSISTANT SECRETARY
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSDC ☒ DELETE	1.1 TITLE	DVPS ☐ Change ☒ Addition
NAME	COBB, D. KEITH	1.2 NAME	Richard L. Handley
STREET ADDRESS	110 SE 6TH ST.	1.3 STREET ADDRESS	450 E. Las Olas Blvd. Ste. 1200
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	VO ☐ DELETE	2.1 TITLE	V ☒ Change ☐ Addition
NAME	ARMSTRONG, FRANK	2.2 NAME	
STREET ADDRESS	110 SE 6TH ST 29TH FLOOR	2.3 STREET ADDRESS	900002156379--7
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	-04/28/97--01049--028
TITLE	TASD ☐ DELETE	3.1 TITLE	AST ☒ Change ☐ Addition
NAME	MENENDEZ, N. MARIA	3.2 NAME	****165.00 ****165.00
STREET ADDRESS	110 S.E. 6TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	P ☐ Change ☒ Addition
NAME		4.2 NAME	Steven Berrard
STREET ADDRESS		4.3 STREET ADDRESS	450 E. Las Olas Blvd. Ste. 1200
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	☐ DELETE	5.1 TITLE	DVP ☐ Change ☒ Addition
NAME		5.2 NAME	Thomas W. Hawkins
STREET ADDRESS		5.3 STREET ADDRESS	450 E. Las Olas Blvd. Ste. 1200
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	☐ DELETE	6.1 TITLE	AT ☐ Change ☒ Addition
NAME		6.2 NAME	Courtland Reddy
STREET ADDRESS		6.3 STREET ADDRESS	450 E. Las Olas Blvd. Ste. 1200
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301

CR2E034 (9/96)

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: Richard L. Handley 4/25/97 954-713-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0290689