FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARIMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L 84500 1. Corporation Name

Principal Place of Business

USAVADEE ENTERPRISES, INC.

Mailing Address

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90139 006 ***150.00

% Yvoni 1128 Ri Ste 23 Royal F	ie Moore Thampson ayal Palm Bench Or- ialm Beach, FL 3341	96 Yunne 1128 Roya Ste 233 1 Royal Au	W Alm	Beh BI.		SPACE	
2. Principal F	lace of Business	2a. Mailing Address		·	4. FEI Number 5 2-1693047		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.7	5 Additional Required
City & Star	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.0	00 May Be ed to Fees
Zip 24	Country 25	Zip	Country 30		8. This corr oration owes the current year in a Personal Property Tax.	angible Yes	— □No
	9. Name and Address of Currer				10. Name and Address of New Registered	Agent	
	THOMPSON, YVO	nne moore	81	Name			:
	Royal Palm Beach, FL 334			82 Street Address (P.O. Box Number is Not Acceptable)			
	Royal Palm	Deach, ML 354	t 1 83				
)	ŕ	84	City	FL	85 Zi	ip Coc e
office or i	to the provisions of Sections 607.050 egistered agent, or both in the State m familiar with, and accept the obliga	of Florida. Such change was au	thorized by	the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the apport	changing ntment as	its registered registered
SIGNATURE	Signature, typed or printed name of registered agei	at an I title if applicable (NOTE:	Renistered Ager	nt signature require d	when reinstating) DATE		
12.		ID DIRECTORS	13.	K Signaturo rodanit d	ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE		∏ DELETE	1.1 TITLE			Chang	ge Addition
NAME	THOMPSON, YUDANE	Moore	1.2 NAME				
STREET ADDRESS	106. Sway Parkway	<i>l</i> least	1 3 STREE	TADDRESS			
CITY-ST-ZIP	Royal Prim Boh.	=1 <u>-3341</u>	1 4 CITY-S	T-ZIP			
TITLE	ו איניים אינ	☐ DELETE	2 1 TITLE			Chang	ge 🗍 Addition
NAME	THOMPSON SAMUE	L LEE II	2.2 NAME				
STREET ADDRESS	101 Swan Farkwa	y East	2.3 STREE	FADDRESS			
CITY-ST-ZIP	Royal Alm Bo	K FL 33411	2. 4 CITY-S	ST-ZIP			
TITLE	139		3.1 TITLE			Chang	ge 🔲 Addition
NAME	THOMPSON, ASher	1-magie	3.2 NAME				
STREET ADDRESS	TOG SWAP PAME	way cast	3.3 STREET	ADDRESS -			
CITY-ST-ZIP	Koyal Palin Bab	- PL 3341)	3.4. CITY-S	T-ZIP		Chons	TO Addition
TITLE	7	∫ DELETE	4.1 TITLE			☐ Chang	ge [] Addition
NAME			4. 2 NAME	- ADDDE-00			
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP TITLE			4.4 CITY-S	1-4P		Chang	e Addition
NAME			5.2 NAME	ſ		9	
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	ļ			
TITLE		☐ DELETE	6.1 TITLE			Chang	ge [] Addition
NAME			62 NAME			_	
STREET ADDRESS			6.3 STREET	ADDRESS			
SARLE ADDRESS			O A OUTS/ ST	(ſ

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(:)(i), Florida Statutes. I further certify that the information indicates 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 uncer 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 attachin ent with an address, with all other like empowered. SIGNATURE: