

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

FILED

Feb 18 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M04997** (6)

1. Corporation Name  
**BEUCHAT USA, INC.**

Principal Place of Business  
**1321 NW 65TH PLACE  
FT. LAUDERDALE FL 33309-1991**

Mailing Address  
**1321 NW 65TH PLACE  
FT. LAUDERDALE FL 33309-1991**



DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b> 21 <b>1225 NW 93RD CT</b> Suite, Apt. #, etc. 22 City & State 23 <b>MIAMI, FL</b> Zip Country 24 <b>33172</b> 25 <b>USA</b>		<b>2a. Mailing Address</b> 26 Suite, Apt. #, etc. 27 <b>PO BOX 653109</b> City & State 28 <b>MIAMI, FL</b> Zip Country 29 <b>33265</b> 30 <b>USA</b>		<b>3. Date Incorporated or Qualified</b> <b>09/11/1984</b>	
<b>4. FEI Number</b> <b>59-2456400</b>		Applied For <input type="checkbox"/> Not Applicable		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>10. Name and Address of New Registered Agent</b>	
<b>9. Name and Address of Current Registered Agent</b> <b>TRICK, WILLIAM WATSON, JR.</b> <b>660 S. FEDERAL HIGHWAY</b> <b>3RD FLOOR</b> <b>POMPANO BEACH FL 33062</b>				<b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code	

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

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	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ZWANG, A.P.</b>	1.2 NAME	
STREET ADDRESS	<b>% SUDAMERICANA BV.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ROTTERDAM, NETHERLANDS</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HANNE, R.A.G.</b>	2.2 NAME	
STREET ADDRESS	<b>% SUDAMERICANA BV</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ROTTERDAM, NETHERLANDS</b>	2.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GROENEVELD, E.</b>	3.2 NAME	
STREET ADDRESS	<b>% SUDAMERICANA BV.</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ROTTERDAM, NETHERLANDS</b>	3.4 CITY-ST-ZIP	
TITLE	<b>VS</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>QUINTANA, ROBERT</b>	4.2 NAME	
STREET ADDRESS	<b>1225 N.W. 93rd COURT</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI, Florida 33172</b>	4.4 CITY-ST-ZIP	
TITLE	<b>President</b> <input type="checkbox"/> DELETE <b>Addition</b>	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Alvarez de Toledo, Marc</b>	5.2 NAME	
STREET ADDRESS	<b>34 Av. Boisboudran</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>Marseille, France 13015</b>	5.4 CITY-ST-ZIP	
TITLE	<b>Asst. Vice President</b> <input type="checkbox"/> DELETE <b>Addition</b>	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Bolufe, Magaly</b>	6.2 NAME	
STREET ADDRESS	<b>1225 N.W. 93rd Court</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>Miami, Florida 33172</b>	6.4 CITY-ST-ZIP	

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; that 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 in an attachment with an address.

SIGNATURE:

*[Signature]*

2/4/98

CR2E034 (1097)