

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # M93735 (2)
 1. Corporation Name
FILCO/USA, INC.



Principal Place of Business: **8716 BAY CREST LANE TAMPA FL 33615**
 Mailing Address: **4907 SHETLAND AVE TAMPA FL 33615 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/11/1988**

4. FEI Number: **59-2903182**
 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

21. Principal Place of Business: **4508 BAY TO BAY BLVD.**
 Suite, Apt. #, etc.: **TAMPA, FL**
 City & State: **TAMPA, FL**
 Zip: **33629**
 Country: **USA**

22. Mailing Address: **4508 BAY TO BAY BLVD.**
 Suite, Apt. #, etc.: **TAMPA, FL**
 City & State: **TAMPA, FL**
 Zip: **33629**
 Country: **USA**

9. Name and Address of Current Registered Agent
TOMSIK, J.J.
4907 SHETLAND AVE
TAMPA FL 33615

10. Name and Address of New Registered Agent
 81 Name: **J.J. TOMSIK**
 82 Street Address (P.O. Box Number is Not Acceptable): **4508 BAY TO BAY BLVD**
 83 City: **TAMPA**
 84 City: **FL** 85 Zip Code: **33629**

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE: *J.J. Tomasic* DATE: **4/28/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	TOMSIK J.J.	1.2 NAME	J.J. TOMSIK
STREET ADDRESS	8716 BAY CREST LANE	1.3 STREET ADDRESS	4508 BAY TO BAY BLVD
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	TAMPA, FL 33629
	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		2.2 NAME	
NAME		2.3 STREET ADDRESS	
STREET ADDRESS		2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	3.2 NAME	
TITLE		3.3 STREET ADDRESS	
NAME		3.4 CITY-ST-ZIP	
STREET ADDRESS		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP		4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 to an address.

SIGNATURE: *J.J. Tomasic* **J.J. TOMSIK** DATE: **4/28/98** **813/831-1133**

CR2E034 (10/97)