FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 12: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P10472** **(9)**

1. Corporate Name

ALEXIS NIHON U S A CORPORATION

Principal Place of Business
10201 HAMMOCKS BLVD., STE. 150
MIAMI FL 33196

Mailing Address
10201 HAMMOCKS BLVD., STE. 150
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/17/1986
3a. Date of Last Report: 06/20/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. # or — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
County — 25 / 30

4. FEI Number: 94-2992459 — 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. Does corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SZUCS, JOSEPH L.
10201 HAMMOCKS BLVD., STE. 150
MIAMI FL 33196

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. [illegible]

DATE [illegible]

12. OFFICER AND DIRECTOR	13. ADDITIONAL CHANGES TO OFFICERS AND/OR DIRECTORS
CPD MASSICOTTE, PAUL J. 320 SIMCOE ST. MONTREAL, QUEBEC	☐ Change ☐ Add
VD IAN WETHERLY, IEN 8 HUDSON WESTMARK MONTREAL, QUEBEC	☐ Change ☐ Add
ASD MICHELIN, DONALD R. 6380 COTE DE LIESSE MONTREAL, QUEBEC	☐ Change ☐ Add
AS COTE, MIMI 773 HARTLAND OUTERMONT MONTEAL, QUEBEC	☐ Change ☐ Add
V SZUCS, JOSEPH L. 10201 HAMMOCKS BLVD #150 MIAMI FL	☐ Change ☐ Add
	☐ Change ☐ Add

14. I hereby certify that the information supplied with this report is substantially complete and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further I certify that the information indicated on the annual report or supplemental annual report is true and complete 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 above, or on an attached exhibit, as an officer or director with no address.

SIGNATURE: Mimi Coté
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Mimi Coté

April 19th, 1995 — Date

(514) 737-3344 — Daytime Phone #

0208240 CP