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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 20 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

P93000022612 (4) DOCUMENT

IOCHPE MAXION U.S.A., INC. Principal Place of Business Mailing Address 9100 S DADELAND BLVD 9100 S DADELAND BLVD **SHITE 1101** SUITE 1101 DO NOT WRITE IN THIS SPACE MIAMI FL 33156 MIAMI FL 33156 3. Date Incorporated or Qualified 03/25/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 63-0760171 Not Applicable Suite, Apt, #, etc. Suite, Apt, #, etc. \$8.75 Additional 夙 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year intangible ☐ Yes □ No 25 30 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 HAMILTON BORTOLETTO 9100 SO, DADELAND BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 1101** 83 MIAMI FL 33156 84 City Zip Code 85 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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE HAMILTON BORTOLETTO NAME 1.2 NAME CR2E034 9100 S DADELAND BLVD SUITE 1101 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GRIEBLER, FERNANDO 2.2 NAME NAME STREET ADDRESS 9100 S DADELAND BLVD SUITE 1101 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST-ZIP TITLE □ DELETE 3.1 TITLE Change Addition MENEGHETTI, DINO R NAME 3.2 NAME 9100 S DADELAND BLVD SUITE 1101 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE SANCHEZ, WALDEY NAME 4.2 NAME 9100 S. DADELAND BLVD., SUITE 1101 STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33156 4.4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY - ST- ZIP 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 with an address.

SIGNATURE: