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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000061894 (0)

EVERITE INVESTMENT USA CORP.

FILED May 01 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address		1 10011001 1/15 30/00 11/11 00/11 00/11 00/10 01/10 01/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10 10/10
1780 N.W. 20 ST 1780 N.W. 20 ST				
MIAMI FL 3314	12	MIAMI FL 33142		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				08/25/1993
2. Principal Pla	ace of Business	2a, Mailing Address		4. FEI Number Applied For
7369		. 26 7369 NW	tz M8	65-0437438 Not Applicable
Sulte, Apt. #		Suite, Apt. #, etc.		- \$9.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23 MIA	mi FL	28 MIAMI	FL	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 3312		29 33126 30	o US.	Personal Property Tax due June 30.
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
DATWANI, AJIT 81 Name DATWANI AJIT				
1415 N. GREENWAY DR.			82 Street	Address (P.O. Box Number is Not Acceptable)
CORAL GABLES FL 33134				
			83 73	.t2 MW 870 PB
			84 City	RS Zin Code
:	<u> </u>			MIAMI FL 33126
11. Pursuant to	the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	the above-named	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I an	n fam iliar with and accept the oblig	gations of, Section 607.0505, Floring	A Spangles A	y
SIGNATURE DATWANI, AJIT Storm 04/21/98.				
Š	Signature, typed or printed name of registered a			required when reinstating) DATE
12.	OFFICERS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	FATIMANII A IIT	[] OLCETE	1.1 TITLE	1
NAME	DATWANI, AJIT		1.2 NAME	DATWANI, ASIT
STREET ADDRESS	1415 N. GREENWAY DR.		1.3 STREET ADDRESS	7369 NW 8th St.
CITY-ST-ZIP	CORAL GABLES FL	DFLETE	1.4 CITY - ST - ZIP	minm) FL 33126 Achange Addition
TITLE	S Datamaku makuu	C office	2.1 TITLE	
NAME	Datwani, manju 1415 n Greenway Dr		2.2 NAME	DATWAMI, IMANTU T369 WW 5th St
STREET ADDRESS	CORAL GABLES FL		2.3 STREET ADDRESS	7369 NW 5th st.
CITY-ST-ZIP	CONAL GABLES PL	DELETE	2. 4 CITY - ST - ZIP	miami FL 33126.
TITLE			3.1 TITLE	Change L_ Rounton
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP 4 1 TITLE	☐ Change ☐ Addition
TITLE NAME		_ otten	4. 2 NAME	Change Aboution
1			4. 2 NAME 4.3 STREET ADDRESS	
STREET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	44 CITY-ST-ZIP 51 TITLE	☐ Change ☐ Addition
1			5.2 NAME	Change 2 7000000
NAME OTROCT ADDRESS				
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP TITLE		☐ DELET E	54 CITY-ST-ZIP 61 TITLE	☐ Change ☐ Addition
NAME		Cottere	62 NAME	Change
J				
STREET ADDRESS			6.3 STREET ADDRESS	
14. I hereby ce	artify that the information supplied	with this filing does not quality for t	6.4 CITY-ST-ZIP	ed 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 eath; 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.				