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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000077191 (3)

M & E ENTERPRISES USA, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			
1760 OAKHURST AVE WINTER PARK FL 32789		P.O. BOX 1274 WINTER PARK FL 32780-1274 US				
						3. Date Incorporated or Qualified 3a. Date of Last Report 11/08/1993 07/29/1996
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26	· · · · · · · · · · · · · · · · · · ·			59-3211168 Not Applicable
Suite, Apt.		Suite, Apt #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State	<u>├</u> ¬ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Zip Countr			8. This corporation has liability for intangible tax under s. 199.032,
24	25 29 30		30			Ftorida Statutes Yes No
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent 81 Name		
	HEMIN, ROBERT A S ORANGE AVE		L			
	TE 1015		Į	82	Street Addr	ess (P.O. Box Number is Not Acceptable)
ORLANDO FL 32801				83		
				84	City	FL 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typod or ponted name of registered	agent and tide if applicable (N	O'l flegistered	Ago	int signature require	ed when reinstating) DATE
12.	OFFICERS /	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			Ιŧ		☐ Change ☐ Addition
NAME	ETSCORN, RICHARD		1.2 NAI			
STREET ADDRESS	1760 OAKHURST WINTER PARK FL 32789		1.3 STREET ADORESS 1.4 CITY- ST-ZIP			
CITY-SY-ZIP TITLE	D	Tours.			1-711	Change Addition
NAME	MILLS, DAVID		2.2 NAME.			_ , _
STREET ADDRESS	817 CHATAS CT		2.3 516	REEL.	ADDRESS	
CITY-ST-ZIP	LAKE MARY FL 32746		2 4 CITY-ST-ZIP		ST - 7/P	
TITLE		DELETÉ	3 1 1 1 1			Change Addition
NAME			3.2 NA			
STREET ADORESS			3.3 STREET ADDRESS 3.4, City-St-74P			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TIT		01-211/	Change Addition
NAME			4. 2 NA		İ	
STREET ADDRESS			4.3 ST	REET.	ADDRESS	
CITY-ST-ZIP			4.4 C(TY - ST - Z(P		1 - ZIP	
TITLE		☐ DELFTE				Change Addition
NAME			5.2 NAI			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE			5.4 CITY+S1+7/P 6.1 TITLE		T · ZIP	Change Addition
NAME		☐ DELFTE	6.2 NA			L. Oriente L. Houtton
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 CIT			
14. 1 do heret	by certify that the information supp	lied with this filing does not qua	alify for the e	exe	mption stated	in Section 119.07(3)(i). Florida Statules, 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 logal 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.						