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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P9400002411 (4)

BEANNE USA CORP.

Principal Place of Business

Mailing Address

FILED May 11 1998 8:00am Secretary of State



132 WHITAKER ROAD 132 WHITAKER ROAD **LUTZ FL 33549** LUTZ FL 33549 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/11/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For RIDLEY PL 16001 BIOLEY PL 16001 59-3218328 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be TAMPA 23 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible usA 24 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LANNO, NANCY **132 WHITAKER ROAD** 82 LUTZ-FL 33549 83 84 TAMPA repeant 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 fice 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 policy and accept the appointment as registered agent, and accept the appointment as registered agent. I am familia with, and accept the objections of Section 607.0505, Florida Statutes. (TURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE 16001 AIDLEY PLACE TAND DA FL 33647-2050 LANNO, HENRY NAME 1.2 NAME 132 WHITAKER ROAD STREET ADDRESS 1.3 STREET ADDRESS **LUTZ FL 33549** 1.4 CITY-S1-ZIP CITY-ST-ZIP DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE __ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 supplier 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 only attachment with an address.