## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000021473 (1) **DOCUMENT #** 

EXPORT USA, INC.

Principal Place of Business Mailing Address 15533 SW 107TH PLACE 15533 SW 107TH PLACE



MIAMI FL 331	57	MIAMI FL 33137	MIAMI PL 3313/				
					3. Date incorporated or Qualified 03/21/1994	3a. Date of Last 08/21/	1995
2. Principal Plac	ce of Business	2a. Mailing Address	. Mailing Address		4. FEI Number Applied For		
26					65-0478670 Not Applicable		
Suite, Apt. #, etc. 27		Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	T	75 Additional ee Required
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	1 1	.00 May Be Ided to Fees
23	Country	<b>28</b>	Cour	nts/	8. This corporation has liability for i		
Zip <b>24</b> ]	25	29	30	ii. y		No	
24	9. Name and Address of Current		1001		10. Name and Address of New R	egistered Agent	
				81 Name			
MADDIC	CTEDUEN I		-	82 Street Addr	ress (P.O. Box Number is Not Acceptab	Je)	
HARRIS, STEPHEN J 15533 SW 107TH PLACE MIAMI FL 33157				Street Address (F.O. Don't diffusion to rect address)			
				83			
			•	84 City		FL 85	Zip Code
familiar with SIGNATURE	n, and accept the obligations of, Secti	ion 607.0505, Florida Sta	tutes.		rd of directors. Thereby accept the app	DATE	
	Signature, typed or printed name of registered agent OFFICERS AND		(NOTE Hagistered	Agent signature reduire	ADDITIONS/CHANGES TO OFF		CTORS IN 12
12.	D OFFICERS AND	DELETE	1.11	THE TOTAL PROPERTY.	7.1551716116 61.111616	☐] Chan	
	HARRIS, STEPHEN		1.2 NA	i			
NAME OXOGET ADDRESS	15533 SW 107TH PLACE			REFT ADDRESS			
STREET ADDRESS	MIAMI FL 33157			TY - ST - ZIP			
CITY-ST-ZIP TITLE	MIMMI PL 33131	[7] DELETE	2 1 11			Chan	ige 🔲 Addition
NAME			2.2 NA	AME			
STREET ADDRESS			2351	REET ADDRESS			
CITY-ST-ZIP			2.4 CI	TY-ST-ZIP			
TITLE		[] DELETE				☐ Char	nge 🔲 Addition
NAME			32 N/	AME			
STREET ADDRESS			33. S	TREET AUDRESS			
CITY-ST-ZIP			3.4 CI	ITY - ST - ZIP			
TITLE		DELFTE	4.17	IILE		Char	nge 🔲 Addition
NAME			4.2 N	AME			
STREET ADDRESS			4.3 S	TREET ADDRESS			
CITY+ST-ZIP		<del>-</del> -,		ITY-SI-ZIP		F7.01.	t ddition
TITLE		☐ DELET€				Char	nge 🔲 Addition
NAME			5.2 N				
STREET ADDRESS			5.3 S	TREET ADDRESS			
City-St-ZiP				ITY - ST - ZIP			non [] Addition
TITLE		DELETE		I		Cha	nge 🔲 Addition
NAME.			6 2 N	ļ			
STREET ADDRESS			638	TREET ADDRESS			
CITY-ST-ZIP			640	ITY-ST-ZIP			

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 allachment with an address.

SIGNATURE:

April 29,1996 (305)232-3228