

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000033146 (9)

1. Corporation Name

DOLLAR U.S.A. INC.



Principal Place of Business

4010 WEST 12TH AVENUE  
HIALEAH FL 33012

Mailing Address

4010 WEST 12TH AVENUE  
HIALEAH FL 33012

3. Date Incorporated or Qualified  
05/02/1994

3a. Date of Last Report  
07/14/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0493458

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

MONTALVO, CILIO  
4010 WEST 12TH AVENUE  
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name

JOSE MICHELEN

82 Street Address (P.O. Box Number is Not Acceptable)

4635 NW 104 Ave.

83

84 City

MIAMI, FL

FL

85 Zip Code  
33178

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 this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of signing officer or director and the date

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
D MONTALVO, CILIO  
STREET ADDRESS  
4010 WEST 12TH AVENUE  
CITY-ST-ZIP  
HIALEAH FL 33012

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
PRESIDENT  
1.3 STREET ADDRESS  
DANET MICHELEN  
4635 NW 104 Ave.  
1.4 CITY-ST-ZIP  
MIAMI, FL 33178

2.1 TITLE  
2.2 NAME  
VICE-PRESIDENT  
JOSE MICHELEN  
2.3 STREET ADDRESS  
4635 NW 104 Ave.  
2.4 CITY-ST-ZIP  
MIAMI, FL 33178

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (12/95)