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 # P94000036611 (9)

FALCON USA, INC.

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FILED

May 11 1998 8:00am

Secretary of State

Principal Place of Business	ce of Business Mailing Address				ini murma nisan binen brene in	1001 ((84 1981
8329 N.W. 68TH STREET	29 N.W. 68TH STREET 8329 N.W. 68TH STREET AMI FL 33166 MIAMI FL 33166					
MIAMI FL 33100				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified		
				05/11/1994		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	+	pplied For
21	26			65-0491957		lot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State	City & State			6. Election Campaign Financing		May Be
23]	28		· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution		to Fees
Zip Country	Ζφ 	Coun	try	8. This corporation owes or has pa	· ·	
24 25 9. Name and Address of Curr	29 ant Registered Agent	[30]		Personal Property Tax due June 10. Name and Address of New Re		□ No
	on regionore rigent		Name	To. Hallo allo Advidso of Holl He	gistored Agent	
Siva ra jah, Siva 8329 n .w. 68th Street						
MIAMI FL 33166			Street Add	fress (P.O. Box Number is Not Acceptal	ole)	}
##A## 7 C 00 100		Ē	33			
		· L				
			City		FL 85 Zip	Code
 Pursuant to the provisions of Sections 607.0: office or registered agent, or both, in the Sta 	02 and 607 1508, Florida Statu	ios, the abo	ove-named cor	poration submits this statement for the p	ourpose of changing i	its registered
egent. Lam familiar with, and accept the obt	igations of, Section 607.0505, FI	orida Statu	tes.	ition's board of directors, I hereby acce	pt the appointment as	s registered
SIGNATURE						
Signaturn, typed or rainfed masse of registered a OFFICE RS A	igent teid tifle if applicable (NO) NO DIRECTORS	1 Registered /	Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTOR	RS IN 12
TITLE P	DELETE	1.1 101	, T	ABBINONS/SHANGES TO STAN	Change	Addition
NAME SIVARAJAH, SIVA		1 2 NAM				
STREET ADDRESS 8329 N.W. 68TH STREET		1	EFT ADDRESS			[8
CITY-ST-ZIP MIAMI FL 33166			-ST-ZIP			(\$
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NAME SIVARAJAH, KUMUTHAKUN	IARI	2.2 NAM	IE .			
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CITY-ST-ZIP MIAMI FL 33166		2. 4 0111	r - S1 - ZIP			
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NAME .		3.2 NAM	IE			ļ
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CITY-ST-ZIP	DELETE		- ST- ZIP		Change	Addition
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STREET ADDRESS		6.2 NAM	F1 ADDRESS			1
CITY-ST-ZIP		6.4 CITY	1			ļ
14. Thereby certify that the information supplied	with this filing does not qualify for			Section 119,07(3)(i), Florida Statutes. I	further certify that the	e 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 oven an attachment with an address.

SIGNATURE:

Siva Sunavaroh

4-1498 (205)592-1980