FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

95 APR 28 PM 2:04

TALLAHASSEE, FLORIDA 32310
-04/28/95--01031--008
****200.00 ****200.00

DOCUMENT # P94000040080

1 Corporate Name
IRMA USA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
c/o UNIVERSAL WORLD 350 Sevilla Avenue, suite 210 CORAL GABLES, FL 33134	c/o UNIVERSAL WORLD 350 Sevilla Avenue suite 210 CORAL GABLES, FL 33134

3. Date Incorporated or Qualified: 5/27/1994 — 3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number
21 c/o UNIVERSAL WORLD	26 c/o UNIVERSAL WORLD	65-0493821 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22 350 Sevilla Av., suite 210	Suite, Apt. #, etc. 27 350 Sevilla Av., suite 210	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
City & State 23 CORAL GABLES, FL	City & State 28 CORAL GABLES, FL	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
Zip / Country 24 33134 / 25	Zip / Country 29 33134 / 30	8. This corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Filings, INC. 3732 N.W. 16th Street Ft. Lauderdale, FL 33311	81 Name: CORPORATE CREATIONS ENTERPRISES INC. 82 Street Address (P.O. Box Numbers Not Acceptable): 4521 PGA Boulevard, suite 211 83 84 City: PALM BEACH GARDENS FL 85 Zip Code: 33418

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Johnny C. Rodriguez, JOHNNY C. RODRIGUEZ, VP — 4/27/95
(If an officer is signing, type or print name and title. If agent is signing, type or print name.) (Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: AKULOVA TAMARA STREET ADDRESS: 1031 N. Miami Beach Blvd. CITY-ST-ZIP: North Miami Beach, FL 33162	11 TITLE: D, P, S, T 12 NAME: AKOULOVA TAMARA 13 STREET ADDRESS: 330 CORAL WAY #102 14 CITY-ST-ZIP: CORAL GABLES, FL 33134 ☒ Change ☒ Add on
TITLE: D NAME: LYUGHILA KATZ STREET ADDRESS: 1031 N. Miami Beach Blvd. CITY-ST-ZIP: North Miami Beach, FL 33162	21 TITLE: No longer Director 22 NAME: sole o/d is ABOVE 23 STREET ADDRESS: 24 CITY-ST-ZIP: ☒ Change ☐ Add on
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	31 TITLE: 32 NAME: 33 STREET ADDRESS: 34 CITY-ST-ZIP: ☐ Change ☐ Add on
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	41 TITLE: 42 NAME: 43 STREET ADDRESS: 44 CITY-ST-ZIP: ☐ Change ☐ Add on
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	51 TITLE: 52 NAME: 53 STREET ADDRESS: 54 CITY-ST-ZIP: ☐ Change ☐ Add on
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	61 TITLE: 62 NAME: 63 STREET ADDRESS: 64 CITY-ST-ZIP: ☐ Change ☐ Add on

-P94000040080-
-04/28/95--01031--008
****200.00 ****200.00

14. I hereby certify that the information supplied with this filing is voluntarily furnished and is not required by law. I hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my electronic 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: X T. AKOULOVA — X 4/27/95 — X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — (Date)