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FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000083263 (1)

1. Corporation Name

DARMEX U.S.A., INC.



Principal Place of Business

Mailing Address

8751 W BROWARD BLVD
STE 404
PLANTATION FL 33324
US

8751 W BROWARD BLVD
STE 404
PLANTATION FL 33324
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 10204 USA TODAY WAY

Suite, Apt. #, etc.

22

City & State

23 MIRAMAR, FL

Zip

24 33025

Country

25 U.S.A.

2a. Mailing Address

26 10204 USA TODAY WAY

Suite, Apt. #, etc.

27

City & State

28 MIRAMAR, FL

Zip

29 33025

Country

30 U.S.A.

3. Date Incorporated or Qualified

11/10/1994

4. FEI Number

65-0535639

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GUSMAO, INACIO J
4011 S. W. 47TH AVENUE
SUITE 1104
DAVIE FL 33314

10. Name and Address of New Registered Agent

81 Name S. ZIMMERMAN
82 Street Address (P.O. Box Number is Not Acceptable)
1000 E. ATLANTIC BLVD
83 SUITE 11
84 City POMPAHO BEACH FL 85 Zip Code 33060

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

S. Zimmerman

S. ZIMMERMAN

4/28/98

Signature, type and printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SECRETARY
NAME RITA GUSMAO
STREET ADDRESS 12670 NW 14TH PL.
CITY-ST-ZIP SUNRISE, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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 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 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 in an attachment with an address.

SIGNATURE: Rita Gusmao - RITA GUSMAO

4/29/98 954-442-6682

CR2E034 (10/97)