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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400089922 1. Corporation Name LP USA, INC.							
2. 00.1,							
Principal Place	of Business	Mailing Address				#1 1811# FB1#8 1811# 1	IBER 1181 (BRI
4000 TOWERSIE	DE TERR	4000 TOWERSIDE TERR	4000 TOWERSIDE TERR				
1701		1701		DO NOT WRITE IN TH	S SPACE		
MIAMI FL 33134		MIAMI FL 33138 US		3. Date Incorporated or Qualifed			
US				12/13/1994	· 		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	 	lied For
21		26			65-0598606		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	`\$ 8.75 Ad Fee Req		
27							
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	
Zip	Country	Zip	Country	•	8. This corporation owes the current year I		_
24	25	29 3	0		Personal Property Tax.	<u> </u>	□No
	9. Name and Address of Current	Registered Agent	04	I	10. Name and Address of New Registere	d Agent	
71141	MERMAN, (HWARD) How	117	81	Name		·	
ZIMMERMAN, (HWARD) HOWARD 4000 TOWERSIDE TERR			82	Street A	Address (P.O. Box Number is Not Acceptable)		-
1701			83				
MIAMI FL 33138				ļ. <u></u>		■ 85 Zip C	odo
			84	City	F	L 85 Zip C	oue
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was aut	nonzed by	the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	of changing its r ointment as reg	egistered istered
SIGNATURE		21075			politined when reinstating) DATE		
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	nt signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	RS IN 12
TITLE	P	DELETE	11 TITLE	1		☐ Change	Addition
NAME			1.2 NAME				,
STREET ADDRESS	4000 TOWEROUPE TERR 4704		1.3 STREET ADDRESS			·	
	MIAMI FL 33138		1.4 CITY-ST-ZIP				,
CITY-ST-ZIP			2.1 TITLE			Change	Addition
NAME	_		2.2 NAME				
STREET ADDRESS	4000 TOWERSIDE TERR, 1701		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33138		2. 4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3.1 TTLE			Change	☐ Addition
NAME			3.2 NAME			1	
STREET ADDRESS			3.3 STREE	TADDRESS		•	
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME			*	
STREET ADDRESS			4.3 STREE	T ADDRESS			İ
City-St-ZIP			4.4 CITY-S	T-ZIP	,		
TITLE		☐ DELETE	5.1 TITLE			☐ Change _	Addition
NAME	1		5.2 NAME		`	,	
STREET ADDRESS	•			TADORESS	·		ŀ
CITY-ST-ZIP	·		5.4 CITY- 8	T-ZIP			- A 1200 -
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	- 1			

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, pron an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE?

STREET ADDRESS

CITY-ST-ZIP