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PROFIT CORPORATION ANNUAL REPORT



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

1996	/.

P95000009849 (7) DOCUMENT # 1. Corporation Name VANCA CRAFT USA, INC. Principal Place of Business Mailing Address 14538 SW 93 TERRACE 14538 SW 93 TERRACE MIAM! FL 33186 MIAMI FL 33186 3. Date Incorporated or Qualified 3a. Date of Last Report NA 02/01/1995 4. FEI Number 65-0573813 2. Principal Place of Business 2a. Mailing Address Applied For 26 14538 SW 93 Tenace 21 14538 SW93 Tenace Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FLA MIAMI FLA MIAMI 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, ÚS A υsΑ Yes No 24 25 29 30 Horida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MORTAS, HENRI C 82 Street Address (P.O. Box Number is Not Acceptable) 14538 SW 93 TERRACE 83 MIAMI FL 33186 84 City 85 Zip Code 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. Thereby 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 registered agent and the strapple at & DATE (NOTE: Sugistered Agent signature roomed which principlating). CR2E034 (12/95) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE TITLE President 1.1 HH F Change Henri C. MORTAS NAME 1.2 NAME 14538 SW 93 Tenace MIAMI FC 33186 STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CHY+ST ZIP TITLE DELETE 2.1 BBE ☐ Change Addit:on NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHTY-ST-ZIP 2.4 CITY- ST-ZiP THILE DELETE 3 1 HILL Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - Z:P 3 4 CHY - S1 - ZiP TITLE DELETE 4.1 TillE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4.0(1Y-ST ZIP TITLE [] DELETE 5 1 Till F ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CHY | S1 - ZIP DELETE TITLE 6.1 HH F ☐ Change ■ Addition NAME 6.2 NAME

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)(x), 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 of director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 14 or Block 15 or Block 16 or Block 17 or Block 17 or Block 16 or Block 17 or Block 17 or Block 17 or Block 17 or Block 18 or

6.3 STREET ADDRESS

6.4 CITY - ST - 7:P

SIGNATURE:

STREET ADDRESS.

CITY-ST-ZIP

HULL C. MORTAS

President

1/31/96

(305)385464