

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000013194 (2)

1. Corporation Name  
**LAURENTI U.S.A. COMPANY**



Principal Place of Business		Mailing Address	
801 BRICKELL AVE 14TH FLOOR MIAMI FL 33131		801 BRICKELL AVE 14TH FLOOR MIAMI FL 33131	
2. Principal Place of Business		3a. Date of Last Report	
21 5201 BLUE LAGOON DR.		02/14/1995	
22 Suite, Apt #, etc. SUITE 100		4. FEI Number 65-0577556	
23 City & State MIAMI, FLORIDA		Applied For Not Applicable	
24 Zip 33126		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
26 33126		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
27 33126		10. Name and Address of New Registered Agent	
28 33126		81 Name SKOLA, THOMAS J.	
29 33126		82 Street Address (P.O. Box Number is Not Acceptable) 5201 Blue Lagoon Drive	
30		83 Suite 100	
		84 City Miami	
		85 Zip Code FL 33126	

9. Name and Address of Current Registered Agent

SKOLA, THOMAS J  
801 BRICKELL AVE  
14TH FLOOR  
MIAMI FL 33131

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: *Thomas J. Skola* DATE: 1/31/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2. NAME	PP ROCHA, CESAR
STREET ADDRESS		3. STREET ADDRESS	5201 Blue Lagoon Drive, Suite 100
CITY-ST-ZIP		4. CITY-ST-ZIP	Miami, Florida 33126
TITLE	<input type="checkbox"/> DELETE	2. TITLE	VPTD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	LAURENTI, ANTONIO FERNANDO
STREET ADDRESS		2.3 STREET ADDRESS	5201 Blue Lagoon Drive, Suite 100
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, Florida 33126
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	SKOLA, THOMAS J.
STREET ADDRESS		3.3 STREET ADDRESS	5201 Blue Lagoon Drive, Suite 100
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Miami, Florida 33126
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	000001788560
STREET ADDRESS		5.3 STREET ADDRESS	-04/22/96--01033--016
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***200.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(k), 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, on an attachment with an address.

SIGNATURE: *Cesar Rocha* CESAR F. ROCHA DATE: 03/12/96 (954) 467-8922

4-20-96

CR2E034 (12/95)