

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Apr 29 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000026181 (4)
1. Corporation Name
USTA ENTERPRISES, INC.



Principal Place of Business 10149 COSTA DEL SOL BLVD. MIAMI FL 33178	Mailing Address 10149 COSTA DEL SOL BLVD. MIAMI FL 33178-2987
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2. Principal Place of Business USTA		2a. Mailing Address		3. Date Incorporated or Qualified 04/03/1995	3a. Date of Last Report 03/29/1996
21 SUITE 320 ENTERPRISES, INC.	26 USTA ENTERPRISES, INC.			4. FEI Number 65-0569024	Applied For Not Applicable
22 MIAMI, FLORIDA	27 SUITE 320			5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 MIAMI, FLORIDA	28 MIAMI, FLORIDA			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 33166	25	29 33166	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
AMERILAWYER 343 ALMERIA AVE. CORAL GABLES FL 33134				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 _____ Signature, typed or printed name of registered person if that applicable (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LOCKE, C. THOMAS			1.2 NAME			
STREET ADDRESS	10149 COSTA DEL SOL BLVD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33178			1.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	AGRAWAL, AL			2.2 NAME	P/D		
STREET ADDRESS	5440 SW 148TH PL			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	MR. CHRISTOPHER TARRANT V.P. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				3.2 NAME	CHRISTOPHER TARRANT		
STREET ADDRESS				3.3 STREET ADDRESS	7570 MIAMI 36 STREET		
CITY-ST-ZIP				3.4 CITY-ST-ZIP	MIAMI 33106		
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			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 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 on an attachment with an address

CR2E034 (9/96)