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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028386 (7)

U.S. CREDIT & COMMERCE, INC.

## FILED Mar 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 848 BRICKELL AVE., SUITE 1015 848 BRICKELL AVE., SUITE 1015 MIAM! FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 65-0590037 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SHAH, ADRIANA M 848 BRICKELL AVE. 1015 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 83 84 Zip Code City 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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition Change DELETE 1.1 TITLE TITLE SHAH, NAEEM H 1.2 NAME NAME STREET ADDRESS 848 BRICKELL AVE., SUITE 1015 1.3 STREET ADDRESS MIAMI FL 33131 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE TITLE 2.1 TITLE SHAH, ADRIANA M NAME 2.2 NAME , 848 BRICKELL AVE., SUITE 1015 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-7IP 2.4 CITY-ST-ZIP DELETE Change \_\_ Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 3**00000245939**3 -03/17/98--01047--002 5.2 NAME . NAME 5.3 STREET ADDRESS STREET ADDRESS \*\*\*150.00 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TETLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not goalify 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 eppowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address

SIGNATURE:

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March. 9/98

CR2E034 (10/97)