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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000046000 (2)

QUALITY USA TRADING, INC.

FILED Jan 22 1997 8:00am Secretary of State

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Principal Plac 7270 NW 12 S SUITE 345 MIAMI FL 3312	TREET	Mailing Address 7270 NW 12 STREET SUITE 345 MIAMI FL 33126-1928	7270 NW 12 STREET SUITE 345			3. Date incorporated or Qualified 3a. Date of Last Report 10/29/1996			
2. Principal Place of Business 2a. Maling Address						4. FEI Number Applied For			<u> </u>
Suite, Apt.	#	26				65-0592516	····		ot Applicable
SU (6, Apr.	#, etc.	27 Sone, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required \$8.75 Additional			
City & Stat	(e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Z _(P)	Country	Zip	Cou	intry	,				
24	25 29		30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curr		LL			10. Name and Address of New Re	gistered	Agent	
DE	PAULA, ANDRE			81	Name				
361	3610 YACHT CLUB DR.			82	Street Ad	dress (P.O. Box Number is Not Acceptat	ole)		··············
# 51								····	
AVE	NTURA FL 33180			83	<u> </u>				
				84	City		FL	85 Zip	Code
agent La SIGNATURE	ini familiar with, and accept the ob	igations of, Section 607.0505,	Florida Sta	lutes	S.	orporation submits this statement for the pation's board of directors. I hereby acceptured when reinstating: ADDITIONS/CHANGES TO OFFICE	DATE		
Jale	PD	DELETE	1.1 [11E	I	7,00110/10/07/14/1020 10 011/1	2010744	Change	Addition
NAME	DE PAULA, ANDRE		1.2 N	AME					
STREET ADDRESS	3610 YACHT CLUB DR. #51	0	1.3 S	TAEEI	ADDRESS				
CITY-ST-ZIP	AVENTURA FL 33180		1,4 0	ITY-S	ST - 71P				
TITLE		DELETE	2.1 T					Change	Addition
NAME			2.2 N						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP TITUE		DELETE	2.41 31 T		ST-ZIP			Charige	Addition
NAME		ELL PERIOD	321					Line Oriengo	
STREET ADDRESS					I ADDRESS				
CITY - ST - ZIP					ST-ZIP				
TITLE		DELETE	4.1.T					Change	Addition
NAME			4.21	IAME	ļ				
STREET ADDRESS			4.3 9	TREET	T ADDRESS	7			
CITY - ST - ZIP		or ere			ST-ZIP				C Tarana
THILE		DELETE	5.1 T			. 1		Change	Addition
NAME Daniel Adams of			521						
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIF		DELETE	54 C		ST-ZIP			Change	Addition
NAME		Pectit	651		1	•		- vivilgo	hadymy)
STREET ADORESS					T ADDRESS				
CITY-ST-ZIP	1				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.