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FILED

Apr 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000062330 (2)

1. Corporation Name  
BILTONG USA, INC.

Principal Place of Business  
1100 PARK CENTRAL BLVD. SOUTH STE 1700  
POMPANO BEACH FL 33064

Mailing Address  
1100 PARK CENTRAL BLVD. SOUTH STE 1700  
POMPANO BEACH FL 33064-2255



2. Principal Place of Business

21 Charlotte  
Suite, Apt. #, etc.

22 City & State  
Charlotte NC

23 Zip Country  
28226

24 28226

2a. Mailing Address

26 7321 Wilmington Circle  
Suite, Apt. #, etc.

27 City & State  
Charlotte - NC

28 Zip Country  
28226

29 28226

3. Date Incorporated or Qualified  
08/10/1995

3a. Date of Last Report  
04/18/1996

4. FEI Number

65-0603982

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

JOUBERT, DAVID  
1100 PARK CENTRAL BLVD. SOUTH STE 1700  
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

Jodi B. Green P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

1499 WEST PALMETO PARK ROAD

83

84 City

BOCA RATON

FL

85 Zip Code

33486

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 Jodi B. Green, Esq.

(Signature, typed or printed name of registered agent and fee, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

4/2/97

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME JOUBERT, DAVID  
STREET ADDRESS 1100 PARK CENTRAL BLVD. SOUTH STE 1700  
CITY-ST-ZIP POMPANO BEACH FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID J. JOUBERT

3/31/97

Date

Daytime Phone #

CR2E034 (9/96)