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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 1. Corporation Name

P95000077461 (8)

S & G ENTERPRISES USA, INC.

| Principal Place of Business Mailing Address        |  |   |  | s santsadt tid sinst athi Anglit abilit dalit idali afall night diffi diffi diffi diffi diffi diffi diffi |             |                                |                               |  |
|--|--|---|--|---|-------------|--------------------------------|-------------------------------|--|
|  | ERSEAS HIGHWAY<br>O FL 33037   | 103375 OVERSEAS HIGHWAY<br>KEY LARGO FL 33037 |  |   |             |                                |                               |  |
| <del></del> ,                                      |  |   |  | 3. Date Incorporated or Qualified 10/10/1995  | 3a. Date    | of Las                         | st Report                     |  |
| 2. Principal Piace of Business 2a. Mailing Address |  |   |  | 4. FEI Number   |             | Т                              | Applied For                   |  |
| 21 /033  |  | 26 /20.13                                     | ox 732                                   | 65-060984   | 0           |                                | Not Applicable                |  |
| Suite, Apt. #                                      |  | Suite, Apt. #, etc.                           |  | 5. Certificate of Status Desired  |             |                                | .75 Additional<br>ee Required |  |
| City & State                                       | Lago Fl  | City & State  28 Tavernier 1                  |  | Election Campaign Financing     Trust Fund Contribution   |             | \$5.00 May Be<br>Added to Fees |                               |  |
| 24 3303  |  | 29 33070                                      | 30 USA                                   | 8. This corporation has liability for in Florida Statutes Yes   | □ No        |                                | ers 199.032,                  |  |
|  | 9. Name and Address of Current F   | Registered Agent                              |  | 10. Name and Address of New R   | egistered . | Agent                          |                               |  |
| THE L  | AW FIRM OF LAWRENCE J SPIEG  | EL CUDTO                                      | 81 Name                                  |   |             |                                |                               |  |
|  | LMERIA AVENUE  | 82 Street Add                                 | dress (P.O. Box Number is Not Acceptable | e)  |             |                                |                               |  |
| CORAL GABLES FL 33134                              |  |   | 83                                       |   |             |                                |                               |  |
| 00104  | CANDLED I E 00104  |   | 03                                       |   |             |                                |                               |  |
|  |  |   | 84 City                                  |   | <u> </u>    | 85                             | Zip Code                      |  |
| 11. Pursuant to                                    | o the provisions of Sections 607.0502 ar   | id 607 1508. Florida Statute                  | s the above named nove                   | pration submits this statement for the purp   | <u> </u>    |                                |                               |  |
|  | ed agent, or both, in the State of Florida.<br>h, and accept the obligations of, Section |   | d by the corporation's bo                | oration submits this statement for the purp<br>ard of directors. I hereby accept the appo                 | intment as  | registe                        | red agent. Lam                |  |
| SIGNATURE  | and descriptions dosigations of education  | COTTOGGG, FRONGA GLATATES.                    |  |   |             |                                |                               |  |
|  | Signature, typico or printed name of registered agent and                                |   | E: Registered Agent signature requir     | ad when renistating)  | DATE        |                                |                               |  |
| 12.  | OFFICERS AND D   |   | 13.                                      | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |             |                                |                               |  |
| TILLE  | PTD CDACE DIRU   | ☐ DELETE                                      | 1 1 THILE                                |   |             | Chan                           | ge 🔲 Addition                 |  |
| NAMI   | SCHRADER-GRACE, RUTH<br>103375 OVERSEAS HIGHWAY  | •   | 1.2 NAME                                 |   |             |                                |                               |  |
| STREET ADDRESS                                     | KEY LARGO FL 33037   |   | 1.3 STREET ADDRESS                       |   |             |                                |                               |  |
| CITY - ST - ZIP                                    | VS   |   | 1.4 CHY-ST-ZIP                           |   |             |                                |                               |  |
| Tirle  | GRACE, ERIC E  | DELETE  | 2 1 THTLE                                |   |             | ] Chan                         | ge 🔲 Addition                 |  |
| NAME   | 103375 OVERSEAS HIGHWAY  | ,   | 2.2 NAME                                 |   |             |                                |                               |  |
| STREET ADDRESS                                     | KEY LARGO FL 33037   |   | 2.3 \$1REET ADDRESS                      |   |             |                                |                               |  |
| CTY-ST ZiP   | NET LANGO TE SSUSY   |   | 2.4 CITY - S1 - ZIP                      |   |             |                                |                               |  |
| TITLE  |  | DELETE  | 3 1 TILLE                                |   |             | _ Chan                         | ge 🔲 Addition                 |  |
| NAME<br>CAUCLI ADDROGO                             |  |   | 3 ? NAME                                 |   |             |                                |                               |  |
| STREET ADORESS                                     |  |   | 3.3 STREET ADDRESS                       |   |             |                                |                               |  |
| CITY-ST-ZIF<br>TITLE                               | ···  | [] DELÉTÉ                                     | 3.4 CHY-ST-ZIP<br>4.1 TiTLE              |   |             |                                |                               |  |
| NAME   |  | [] becele                                     |  |   | L.          | ] Chan                         | ge 🔲 Addition                 |  |
| STHEFT ADDRESS                                     |  |   | 4.2 NAME                                 |   |             |                                |                               |  |
| CITY - ST - ZIP                                    |  |   | 4.3 STREET ADDRESS                       |   |             |                                |                               |  |
| TITLE  |  | DELETE  | 4 4 CHY - ST - ZIP<br>5 1 TIFLE          |   |             | 7 2500                         | . [] ////                     |  |
| NAME   |  | <u></u>                                       | 5 2 NAME                                 | ,   | L.          | ] Chang                        | ge                            |  |
| STREET ADDRESS                                     |  |   |  |   |             |                                |                               |  |
| CITY-ST-ZiP  |  |   | 5 3 STREET ADORESS                       |   |             |                                |                               |  |
| TILLE  | <del></del>  | DELETE  | 5 4 CITY - ST - ZIP<br>6 1 TITLE         |   |             | I Coss                         | n                             |  |
| NAME   |  | C pettie                                      | 6.2 NAME                                 |   | L.          | ] Chang                        | ge                            |  |
| STREET ADDRESS                                     |  |   |  |   |             |                                |                               |  |
| G THE PARAMETER                                    |  |   | 6.3 STREET ADDRESS                       |   |             |                                |                               |  |

SIGNATURE:

Muth Schraden Grace

6.4 CITY-S3-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 legat 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 13 if manger, or of an allochment with an address.