CORI ANNU	PROFIT PORATION JAL REPORT 1996	Sandra Secre	ARTMENT OF STATE a B. Mortham etary of State F CORPORATIONS		.ED 996_8:00 am	
DOCUMENT # P95000084541 (8) DACOS U.S.A., INC.				Secretary of State		
Principal Place		Mailing Address				*-
MIAMI BEAC	I ROAD. SUITE 421 XH FL 33139	1602 ALTON ROAD. MIAMI BEACH FL 33:		3. Date Incorporated or Qualified 11/03/1995	3a. Date of Last Report	]
2. Principal Pia 21	ace of Business	2a. Mailing Address 26		4. FEt Number 65-06(6960	Applied For Not Applicable	
Suite, Apt #	#, etc.	Suite, Apt. #, etc. 27	· • • • • • • • • • • • • • • • • • • •	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	;	City & State		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
24]	Country 25	2)p 29	Country 30	8. This corporation has liability for in Florida Statutes 🙀 Yes	ntangible tax under s 199.032,	
	9. Name and Address of Cu	rrent Registered Agent	61 Name	10. Name and Address of New R	egistered Agent	
FRIED, I			62 Street Add	ress (P.O. Box Number is Not Acceptabl	0)	
	BAYSHORE DRIVE #2706		63			
	FL 33131		84 City		<b>B5</b> Zip Code	-
11. Pursuant te	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	tes, the above-named corpo	ration submits this statement for the pur	FL   bose of changing its registered office	
o⊢registea familiar wit	ed agent, or both, in the State of th, and accept the obligations of,	Florida, Such change was authori. Section 607.0505, Florida Statute	zed by the corporation's boa s.	ird of directors. I hereby accept the appo	intment as régistered agent. I am	
SIGNATURE	Signative, typed or privated new old registered	agent and trin it applicable (N	OTE Registered Agent signature require	ud when rainstatingi	DATE	<u>ي</u>
12. TITLE	OFFICERS		<b>13.</b> 1. 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	2E034 (12/95)
NAMÍ	POPOVIC, MILAN		1.2 NAME			35
STREET ADDRESS	1602 ALTON ROAD, SUF MIAMI BEACH FL 33139	TE 421	1 3 STREET ADDRESS			2E0
CUTY-ST ZIP THEF		DELETE	1.4 CITY - ST- ZIP 2-1 TITLE		Change 🛄 Addition	б (
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CITY - ST-ZIP		DELETE	3 1 TITLE		Change 🔲 Addition	
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101E NAMI		<b>—</b> .	3 2 NAME 3 3 STREET ADDRESS			
160		_	3 2 NAME 3 3 STREET ADDRESS 3 4 CITY : ST - ZIP			
DRUF NAMI SUBELLADE#ESS GU <u>Y_SL_ZE</u> DULF	- 		3.3 STREET ADDRESS 3.4 City - St - Zip 4.1 Title		Change Addition	-
TRUE NAME SUBJEE ADORESS OUT SE ZIE		_	3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4.1 TITLE 4 2 NAME		Change Addition	-
TREF NAME STREEF ADORESS CATY SE ZAF TREF NAME		DELFTE	3.3 STREET ADDRESS 3.4 City - St - Zip 4.1 Title			
TIGLE NAM) SUBLE ADORESS GUT_ST_ZP TIGLE NAME STRUE ADORESS CUT_ST_ZP TIGLE		_	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		Change Addition	
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TRUE NAMI STRUELADURESS GUT_ST_ZEF THUE NAME STRUELADURESS CUT_ST_ZEF TAUE NAME STRUELADURESS CUT_ST_ZEF TAUE NAME STRUELADURESS CUT_ST_ZEF TAUE NAME STRUELADURESS CUT_ST_ZEF TAUE NAME STRUELADURESS CUT_ST_ZEF TAUE NAME STRUELADURESS	t the information indicated on this I am an officer or director of the c i Block 12 or Block 13 if changed	DELETE	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 multipoort is true and accurse 6 4 CITY-ST-ZIP	ate and that my signature shall have the	Change Addition	