

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$750.

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**  
**Jul 16, 1999 8:00 am**  
**Secretary of State**

07-16-1999 90016 044 \*\*\*150.00

DOCUMENT # **P96000009772 (0)**

1. Corporation Name

**KAPA USA CORP.**

Principal Place of Business

~~2055 NW 79 STREET~~  
~~MIAMI FL 33122~~

Mailing Address

~~2055 NW 79 STREET~~  
~~MIAMI FL 33122~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/31/1996**

2. Principal Place of Business

21 **1237 N.W. 93rd Ct**

Suite, Apt. #, etc.

2a. Mailing Address

26 **Same**

Suite, Apt. #, etc.

4. FEI Number

**65-0641574**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

22

27

City & State

City & State

23 **Miami FL**

28

Zip Country

29

24 **33172-2848** 25 **U.S.A.**

30

9. Name and Address of Current Registered Agent

**LEMARCHAND, JUAN P**

~~2055 NW 79TH AVE.~~

~~MIAMI FL 33122~~

10. Name and Address of New Registered Agent

81 Name

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

**12708 N.W. 11 Terrace**

83

84 City

**Miami**

**FL**

85 Zip Code **33182**

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]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**7/7/99**

12. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ DELETE  
NAME **LEMARCHAND, JUAN P**  
STREET ADDRESS **9619 FONTAINEBLEAU BLVD #618**  
CITY-STATE-ZIP **MIAMI FL 33472-12708 NW 11 TERR. MIAMI FL 33182**

TITLE **VTD** ☒ DELETE  
NAME **IGLESIAS, CESAR**  
STREET ADDRESS **281 SW 122 AVE**  
CITY-STATE-ZIP **MIAMI FL 33184**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS **12708 N.W. 11 Terrace**  
14 CITY-STATE-ZIP **Miami, FL 33182**

21 TITLE ☐ Change ☒ Addition  
22 NAME **Carina Lemarchand**  
23 STREET ADDRESS **9619 Fontainebleau Blvd. #501**  
24 CITY-STATE-ZIP **Miami, FL 33172**

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS

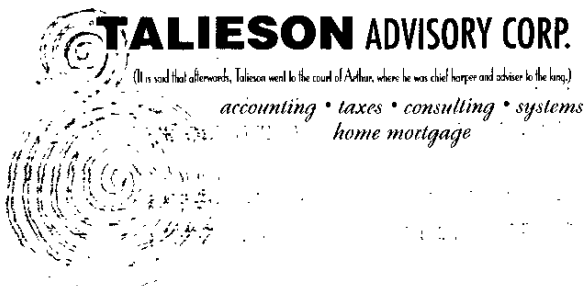
41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS

14. I 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 as an attachment with an address.

§ 84988-90016-44  
P96000009772



July 7, 1999

Division of Corporations  
Annual Reports  
PO Box 6327  
Tallahassee, FL 32314

**Reference:** Kapa USA Corp. FEI#: 65-0641574, 1999 Annual Report

To Whom It May Concern:

Please be advised that this application is being sent at this time because Kapa USA Corp. never received the application, or any notice regarding the annual report for 1999.

As per our phone conversation with Joan at the Florida Department of State Division of Corporations, attached please find a corrected copy of the annual report for 1999 and the \$150.00 filing fee.

In the 1998 annual report, we corrected all of the mailing information but apparently, as Joan informed us during our phone conversation, all the correspondence was still being sent to the old address (2055 NW 79<sup>th</sup> Street, Miami, FL 33122). Our new address is 1237 NW 93<sup>rd</sup> Ct., Miami, FL 33172-2848.

The president of this corporation is a foreign shareholder, travels constantly overseas, and has no one to help him with his everyday administrative duties. At this time we would like to bring the corporation up to date by filing for the 1999 Annual Report. Please consider waiving the penalty for this time only, since the information never reached us. The circumstances were beyond our control, considering that we had changed the mailing information in the annual report for 1998.

Please feel free to contact us with any questions that you may have.

Sincerely,

  
Yolanda Duran  
Accountant