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 # P96000029030 (9)

PROTECH INTERNATIONAL USA, INC.

FILED May 08 1997 8:00am Secretary of State



Principal Place 420 CAMION \$1 VENICE FL 3428	TREET	Mailing Address 420 CAMION STREET VENICE FL 34292-2801				i is it fili sili		
					3. Date Incorporated or Qualified 04/03/1996	3a. Date of La	st Report]
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number -0655/0	9	Applied For Not Applicable	
Suite, Apt	·	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.7	5 Additional Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	☐ Add			
Z(p 24	Country Zip 30			Florida Statutes		is liability for intangible tax under s. 199.032, Yes No		
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134				83	10. Name and Address of New R	ble)		1
office or re agent. Lar SIGNATURE	egistered agent, or both, in the Staten from the could be appeared by which and accept the obligation of the country of the co	e of Florida. Such change was a pations of, Section 607.0505, Fix the section for the section of	es, the ab authorized brida State E Registered	ove-named corporate		purpose of changir opt the appointment 3//2/57	t as registered	
12.	PD OFFICERS AN	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT		8
THLE NAME STREET ADDRESS CITY-ST-ZIP	RICH, MICHAEL H 420 CAMION STREET VENICE FL 34292	Derrese				المانان في	ige Auoniusi	R2E034 (9/96)
TITLE NAME STREET ADDRESS	STD RICH, BONITA J 420 CAMION STREET	DELETE	2.1 TIT 2.2 NA	LE		Chan	ge 🔲 Addition	75
CHY-S1-ZIP THLE NAME	VENICE FL 34292	DELETE	3.1 TIT 3.2 NA	ME		Char	nge Addition	
STREET ADDRESS City-St-7iP Till NAME		DELETE	1			☐ Char	nge Addition	
SIREEI ADURESS OHY-ST-ZIP		☐ DELETE	4.3 ST	REET ADDRESS (Y-ST-ZIP		Chan	nge Addition	
NAME STREET ADDRESS CITY - ST - ZIP			5.2 NA 5.3 ST			3.00	-	
TITLE NAME STREET ADDRESS		☐ DELETE	6.1 TIT 62 NA	l.E		L. Char	nge Addition	
CITY-S1-ZIF			6.4 Ci	Y-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

SIGNATURE: