

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # P96000030735 (0)

1. Corporation Name
USA 21, INC.



Principal Place of Business

301 SUNRISE DR., STE. 5C
KEY BISCAYNE FL 33149

Mailing Address

301 SUNRISE DR., STE. 5C
KEY BISCAYNE FL 33149

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 155 Sunrise Dr.	26 P.O. Box 1347
22 Suite 4A	27 Suite, Apt. #, etc.
23 Key Biscayne, FL	28 Key Biscayne, FL
24 33149	29 33149
25 USA	30 USA

3. Date Incorporated or Qualified	Applied For
04/03/1996	Not Applicable
4. FEI Number	
65-0666508	
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

6. Name and Address of Current Registered Agent
PEDREIRA, JOSE R
301 SUNRISE DR., STE. 5C
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 155 Sunrise Dr.
84 Suite 4A
85 City
Key Biscayne FL 33149

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	PEDREIRA, JOSE R	1.2 NAME	Pedreira, Jose R
STREET ADDRESS	301 SUNRISE DR., STE. 5C	1.3 STREET ADDRESS	155 Sunrise Dr. 4A
CITY-ST-ZIP	KEY BISCAYNE FL 33149	1.4 CITY-ST-ZIP	Key Biscayne, FL 33149
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME		2.2 NAME	C/S
STREET ADDRESS		2.3 STREET ADDRESS	Bou, Janet
CITY-ST-ZIP		2.4 CITY-ST-ZIP	155 Sunrise Dr. 4A
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME		3.2 NAME	V/T
STREET ADDRESS		3.3 STREET ADDRESS	Lozano, Gonzalo
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Orense, 12 - 2nd Floor
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	Rodriguez, Francisco
STREET ADDRESS		4.3 STREET ADDRESS	Orense, 12 - 2nd Floor
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MADRID, SPAIN
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 on an attachment with an address.

SIGNATURE _____ Date _____

CR2E034 (10/97)