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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000033658 (1)

U.S. PINNACLE, INC.

FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			
•	<u> </u>			
8322 N.W. 68TH \$T. MIAMI FL 33166 US	8322 N.W. 68 ST. Miami Fl 33166 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
ท	26	26		Not Applicable
Suite, Apt. #, etc.	Suito, Apt. #, etc.	<u> </u>		\$8.75 Additional Fee Required
City & State City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	2 ip 30	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ★ Yes No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered	d Agent
DAVILA, SEBASTIAN		81 Name		
8290 LAKE DR. #305		82 Street Ad	Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33166		83		
		84 City	Fl	L 85 Zip Code
office or registered agent, or both, in t	607.0502 and 607.1508, Florida Statules, the State of Florida, Such change was authoho obligations of, Soction 607.0505, Florida	orized by the corpor	progration submits this statement for the purpose alion's board of directors. I hereby accept the ap	of changing its registered appointment as registered

agom: ra	in territor that, and accopt the enganette of country of				
SIGNATURE	Signature, typoid or printed name of registered agest and like if applicable	0.011.11:	a sternet Apart pignall, ro	required when reinstaling) DATE	
12.			registered Agent signature required when reststaling) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE)ELETE	1.1 TITLE	Change Addition	
NAME	DAVILA, NIGOLAS		1.2 NAME		
STREET ADDRESS	8512 NORTHWEST SETH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI-FL 33166		14 CHY-S1-7IP		
TITLE		DELETE	21 TITLE P/D	. Change Addition	
NAME	DAVILA, SEBASTIAN		22 NAME	•	
STREET ADDRESS	8290 LAKE DR., #305	•	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 11TLE	Change Addition	
NAME			3.2 NAME	·	
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	TI	DELETE	4 1 TITLE	Change Addition	
NAME	D.		4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
			4.4 CHY-ST-ZIP		
CITY-ST-ZIP TITLE		ELETE	5.1 TITLE	Change Addition	
Į.		ACK 14	5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		DELETE	5.4 CHY-ST-ZIP 6.1 TITLE	Addition	
TITLE	ריז ר	/LLC 16	6.2 NAME	000002417380 Addition -01/30/9801066008	
NAME					
STREET ADDRESS			6.3 STREET ADDRESS	***150.00 1·30	

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 offect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address?

CR2E034 (10/97)