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

FILED
Feb 26 1997 8:00 am
Secretary of State

DOCUMENT # P96000050179

1. Corporation Name

TEXTECH USA, INC.

Principal Place of Business / Mailing Address

353 WEST 47th STREET # 8-D

MIAMI BEACH, FL 33140

2. Principal Place of Business: 353 W.47th Street	2a. Mailing Address: 353 W. 47th Street
Suite, Apt. #, etc: # 8-D	Suite, Apt. #, etc.: #8-D
City & State: Miami Beach, FL	City & State: Miami Beach, FL
Zip: 33140 · County: Dade	Zip: 33140 · County: Dade

3. Date Incorporated or Qualified: June 26, 1996
3a. Date of Last Report: N/A
4. FEI Number: 65-0623972 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Larry Wolfe
200 - A John Knox Road
Tallahassee, FL 32303-6643

10. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

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 ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Director ☒ DELETE	TITLE	Director ☒ Change ☐ Addition
NAME	Rosa Farfan	NAME	Leeia Burge
STREET ADDRESS	353 W. 47th Street #8-D	STREET ADDRESS	353 W. 47th Street #8-d
CITY ST ZIP	Miami Beach, FL 33140	CITY ST ZIP	Miami Beach, FL 33140
TITLE	☐ DELETE	TITLE	President ☐ Change ☒ Addition
NAME		NAME	Leeia Burge
STREET ADDRESS		STREET ADDRESS	353 W. 47th Street #8-d
CITY ST ZIP		CITY ST ZIP	Miami Beach, FL 33140
TITLE	☐ DELETE	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	
TITLE	☐ DELETE	TITLE	☐ Change ☐ Addition
NAME		NAME	200002099632--6
STREET ADDRESS		STREET ADDRESS	-02/27/97--01041--001
CITY ST ZIP		CITY ST ZIP	*****173.75 *****173.75
TITLE	☐ DELETE	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	
TITLE	☐ DELETE	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Leeia Burge / President/Director Leeia Burge 2/25/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

CR2E034 (9/96)