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May 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000051025 (0)**

1. Corporation Name
US AMERICAN COMMON MARKET, INC.

Principal Place of Business	Mailing Address
~~10400 SOUTHWEST 8 LANE~~ ~~MIAMI FL 33174~~ 3180 S.W. 118 Ave Miami, FL 3317r	POST OFFICE BOX 654238 MIAMI FL 33265-4238

2. Principal Place of Business 21: 3180 S.W. 118 Ave	2a. Mailing Address 26: P.O. Box 654238	3. Date Incorporated or Qualified: 06/14/1996	3a. Date of Last Report: No Report
Suite, Apt. #, etc. 22:	Suite, Apt. #, etc. 27: Miami FLA	4. FEI Number: 65-0674880	Applied For / Not Applicable
City & State 23: Miami FLA	City & State 28: 33265	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip 24: 3317r Country 25: Dade	Zip 29: Country 30: Dade	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

~~AMERILAWYER CHARTERED~~
~~343 ALMERIA AVENUE~~
~~CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 3180 S.W 118 Ave

83: Miami

84 City: FL 85 Zip Code: 3317r

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] 4/2/97
Signature of, typed or printed name of registered agent and, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GONZALEZ, MAGALI M ~~10400 SOUTHWEST 8 LANE~~ ~~MIAMI FL 33174~~ →	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Pres GONZALEZ MAGALI M 3180 S.W. 118 AVE MIAMI FL 3317r ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GONZALEZ, RAMON T ~~10400 SOUTHWEST 8 LANE~~ ~~MIAMI FL 33174~~ →	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	S GONZALEZ RAMON T 3180 S.W. 118 AVE MIAMI FL 3317r ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GONZALEZ, FERNANDO A ~~10400 SOUTHWEST 8 LANE~~ ~~MIAMI FL 33174~~ →	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	T GONZALEZ FERNANDO A 3180 S.W 118 AVE MIAMI FC 3317r ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☑ Addition 5-16-97
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 700002195867 -05/30/97--01034--025 ***165.00

CR2E034 (9/96)

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: [signature] 4/2/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #