## 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 # P96000092753 (8)

DATACHECK U.S.A., INC.

Principal Place of Business						
					SUITE	1011

SIGNATURE:

Mailing Address

## **FILED** May 20 1998 8:00am Secretary of State



LOUIDES N. ESPINSA 4/25/98 (305) 935-3666

18151 NE 31ST CT. SUITE 1011 N MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/13/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number APPLIED FOR 65-0748315 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes □ No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ESPINOZA, LOURDES M 18151 NE 31ST CT, SUITE 1011 82 Street Address (P.O. Box Number is Not Acceptable) N MIAMI BEACH FL 33160 83 84 City 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, 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 DELETE TITLE 1.1 TITLE Change **ESPINOZA, LOURDES** NAME 1.2 NAME 18151 NE 31ST CT. SUITE 1011 STREET ADDRESS 1.3 STREET ADDRESS N MIAMI BEACH FL 33160 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Addition Change TITLE 2.1 TITLE WATTS, DAVID NAME 2.2 NAME 18151 NE 31ST CT, SUITE 1011 STREET ADDRESS 2.3 STREET ADDRESS N MIAMI BEACH FL 33160 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE **ESPINOZA, LOURDES** MAME 3.2 NAME 18151 NE 31ST CT, SUITE 1011 3.3 STREET ADDRESS STREET ADDRESS N MIAMI BEACH FL 33160 CITY-ST-ZIP 34. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE **ESPINOZA, LOURDES** 4.2 NAME NAME 18151 NE 31ST CT. SUITE 1011 STREET ADDRESS 4.3 STREET ADDRESS N MIAMI BEACH FL 33160 CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 concentration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in