

AMENDED
CORPORATION
ANNUAL REPORT
1998



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

FILED
May 05 1998 8:00am
Secretary of State

DOCUMENT # P96000098689 (8)
1. Corporation Name
DAVING INVESTMENTS (U.S.A.) INC.

Principal Place of Business Mailing Address
1958 IMPERIAL GOLF COURSE BLVD **1958 IMPERIAL GOLF COURSE BLVD**
NAPLES FL 34110 **NAPLES FL 34110**
US **US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/03/1996

2. Principal Place of Business 2a. Mailing Address
21 9955 N. TAMiami TRAIL **26**

Suite, Apt. #, etc. Suite, Apt. #, etc.
22 SUITE 4 **27**

City & State City & State
23 NAPLES, FL **28**

Zip Country Zip Country
24 34108 **25 U.S.** **29** **30**

4. FEI Number Applied For
65-0722251 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
HERRING, DAVID R C
1958 IMPERIAL GOLF COURSE BLVD
NAPLES FL 34110

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | |
|----------------------------|--------------------------------|---------------------------------|
| TITLE | DPST | <input type="checkbox"/> DELETE |
| NAME | HERRING, DAVID R C | |
| STREET ADDRESS | 1958 IMPERIAL GOLF COURSE BLVD | |
| CITY-ST-ZIP | NAPLES FL | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | HERRING, MICHELLE USA | |
| STREET ADDRESS | 1958 IMPERIAL GOLF COURSE BLVD | |
| CITY-ST-ZIP | NAPLES FL | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|--------------------------------|--|
| 1.1 TITLE | V-P | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME | CASH, RICHARD G | |
| 1.3 STREET ADDRESS | 1837 IMPERIAL GOLF COURSE BLVD | |
| 1.4 CITY-ST-ZIP | NAPLES FL 34110 | |
| 2.1 TITLE | PLEASE DELETE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | THE ABOVE | |
| 2.3 STREET ADDRESS | David R Herring | |
| 2.4 CITY-ST-ZIP | APRIL 27TH 1998 | |
| 3.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | 300002511608 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | -05/05/98--01116--023 | |
| 5.3 STREET ADDRESS | ***61.25 | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 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: *David R Herring* **DAVID R C HERRING** **APRIL 27TH 1998** **FEBRUARY 05, 98 (941)514-0900**