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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P97000015631 (9)

ECRAN USA, INC.

FILED Apr 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address **B201 NW 71ST AVENUE** 8201 NW 71ST AVENUE TAMARAC FL 33321 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0731772 26 Not Applicable Suite Ant # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ZIPPIN, ROBERT S ESQUIRE 7101 W. MCNAB ROAD Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 200 83 TAMARAC FL 33321 City 84 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. D DELETE Change Addition NAME CROWE, ANTHONY C 1.2 NAME P.O. BOX 468, GREENVILLE STREET STREET ADDRESS 1.3 STREET ADDRESS ST. HELIER, JERSEY, CHANNEL OC JE48W-T CITY-ST-ZIF 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE STAPLES, ANTHONY JOHN NAME 2.2 NAME P.O. BOX 468, GREENVILLE STREET STREET ADDRESS 2.3 STREET ADDRESS ST. HELIER, JERSEY, CHANNEL OC JE48W-T CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change X Addition 3.1 TITLE VP/S/T NAME 3.2 NAME CYNTHIA GILBERT 8201 N.W. 71ST AVENUE TAMARAC, FL 33321 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY - ST - ZiP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 traspe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change, or on an attachment with an address.

SIGNATURE:

(954)721-4172

CR2E034 (10/97