FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000038559

1. Corporation Name

AAA ENTERPRISES USA INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90305 047 ***150.00



Mailing Address					- C 1887/885 (10 1861) (882) ABEN ABINE BRIEF BRIEF FRANCISCHE GENDE BINER ARIN CRUT				
Principal Place of Business Mailing Address									
6431 S.W. 35TH STREET 6431 S.W. 35TH STREET MIAMI FL 33155 MIAMI FL 33155						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 04/30/1997			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				65-0748838		N	ot Applicable
Suite, Apt.	⊭, etc.	Suite, Apt. #, etc.				E Continue of Status Desired		\$8.75	Additional
22		27				5. Certificate of Status Desired		Fee R	equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip Country				8. This corporation owes the curre	nt year Int	angible	∇
24	25 29 30			Personal Property Tax.				Yes Yes	No
	9. Name and Address of Current					10. Name and Address of New R	gistered	Agent	
				81	Name				Ì
	AN, JOSE S		00 81-14			duran (D.O. Day Aliyashay in Not Accountable)			
6431	S.W. 35TH STREET	8.			Street Addres	ss (P.O. Box Number is Not Accepta	Jid)		
MIAN	M FL 33155			83					
				84	City	the second second		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		13.			ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECT	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TI	TLE _	T			Change	☐ Addition
NAME	ROMAN, JOSE A		1.2 NA	ME	}				. }
STREET ADDRESS	6431 S.W. 35TH STREET		1.3 ST	REET	ADDRESS				
	MIAMI FL 33155		1.4 CITY-ST-ZIP		ľ				
CITY-ST-ZIP		☐ PELETE	2.1 Th		 +		_	☐ Change	☐ Addition
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NAME			4.2 N]				Ì
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CITY-ST-ZIP			4.4 CF	TY-ST-	-ZIP			=-	
TITLE		☐ DELETE	5.1 TIT		}			Change	☐ Addition
NAME			5.2 NA						}
STREET ADDRESS		•	5.3 ST	REET	ADDRESS				
CITY-ST-ZIP		<u> </u>	5.4 CT	TY-ST-	-ZIP				
TITLE		☐ DELETE	6.1 TI	TLE	T			☐ Change	☐ Addition
NAME			6.2 N	ME					
STREET ADDRESS			6.3 \$7	REET	ADORESS				\
CITY-ST-ZIP			6.4 CF	TY-ST-	-ZIP				1
JIII - QI - CH						···			

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, with all other like empowered.

SIGNATURE: