

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

FILED

Apr 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthern Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000043655 (4)

1. Corporation Name  
USA ONE CORP.

Principal Place of Business 1501 E. HALLANDALE BEACH BLVD SUITE 316 HALLANDALE FL 33009	Mailing Address 1501 E. HALLANDALE BEACH BLVD SUITE 316 HALLANDALE FL 33009
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1749 E HALLANDALE BEACH BLVD Suite, Apt. #, etc. 22 316 City & State 23 HALLANDALE FL Zip 24 33009 Country 25		2a. Mailing Address 26 1749 E HALLANDALE BEACH BLVD Suite, Apt. #, etc. 27 316 City & State 28 HALLANDALE FL Zip 29 33009 Country 30		3. Date Incorporated or Qualified 05/16/1997	
				4. FEI Number 65-0753610	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent OREZZOLI, RONNIE 1501 E. HALLANDALE BEACH BLVD SUITE 316 HALLANDALE FL 33009		10. Name and Address of New Registered Agent 81 Name OREZZOLI, ROSA 82 Street Address (P.O. Box Number is Not Acceptable) 1749 E. HALLANDALE BEACH BLVD 83 SUITE 316 84 City HALLANDALE FL 85 Zip Code 33009	
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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: Rosa OREZZOLI (NOTE: Registered Agent signature required when reinstating) DATE: 4/24/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	PSD
NAME	OREZZOLI, ROSA	1.2 NAME	OREZZOLI, ROSA
STREET ADDRESS	1501 E. HALLANDALE BEACH BLVD., SUITE 316	1.3 STREET ADDRESS	1749 E HALLANDALE BEACH BLVD SUITE 316
CITY-ST-ZIP	HALLANDALE FL 33009	1.4 CITY-ST-ZIP	HALLANDALE, FL 33009
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 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: Rosa OREZZOLI President DATE: 4/24/98 (954)455-3334

CR2E034 (10/97)