

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

FILED  
Feb 24 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000046841 (7)

1. Corporation Name

SIGA DESIGNS U.S.A. CORP.

Principal Place of Business

678 WOODCREST ROAD  
KEY BISCAYNE FL 33149

Mailing Address

678 WOODCREST ROAD  
KEY BISCAYNE FL 33149

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1997

4. FEI Number

650764378

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

7. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

BROWN, MORTON P  
100 SE 2ND STREET, 17TH FLOOR  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and then applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
ERIC SILVERMAN ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
PRESIDENT ERIC SILVERMAN ☐ DELETE  
417 PARK AVE. 9S  
NY NY 10022-4401

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
VICE-PRESIDENT MARGARETHA SILVERMAN ☐ DELETE  
417 PARK AVE 9S  
NY NY 10022-4401

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME ☐ Change ☐ Addition  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE 22 NAME ☐ Change ☐ Addition  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE 32 NAME ☐ Change ☐ Addition  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE 42 NAME ☐ Change ☐ Addition  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE 52 NAME ☐ Change ☐ Addition  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE 62 NAME ☐ Change ☐ Addition  
63 STREET ADDRESS  
64 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 the attachment with an address.

SIGNATURE:

2/16/98

CR2E034 (10/97)