

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

FILED
Aug 19 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 997000055653			
1. Corporation Name ESCALA USA, INC.			
Principal Place of Business 401 MIRACLE MILE SUITE 402 CORAL GABLES FL 33134		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
9. Name and Address of Current Registered Agent Gonzalez-Boyer, Gladys Esq. 1021 NORTH KENDALL BLVD STE 208 MIAMI FL 33136		10. Name and Address of New Registered Agent	
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.		DO NOT WRITE IN THIS SPACE 07/02/99 90005 007 150.00 3. Date Incorporated or Qualified 06/24/1997 4. FEI Number 65-0763342 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 the current year intangible Personal Property Tax. ☐ Yes ☐ No	
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			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE ☐ Change ☒ Addition			
1.2 NAME ARVELO, LILIAN			
1.3 STREET ADDRESS 401 MIRACLE MILE, SUITE 402			
1.4 CITY-ST-ZIP CORAL GABLES, FL 33134			
2.1 TITLE ☐ Change ☐ Addition			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE ☐ Change ☐ Addition			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE ☐ Change ☐ Addition			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE ☐ Change ☐ Addition			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE ☐ Change ☐ 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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

06/15/99

2017749027

CR2004 (11/98)

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582236-90005-7

ESCALA USA
Tourism Wholesalers

ESCALA USA, INC.
401 MIRACLE MILE, #402
CORAL GABLES, FL. 33134
TEL: 305-4429578

June 15, 1999

Florida Department of State
Division of Corporations
Tallahassee, FL 32399

Ref: Annual Report
Escala Usa, Inc.
F.E. Number: 64-0763342

We are submitting our annual report with this letter including the regular fee with report and requesting an abatement of late charge due to circumstances beyond our control.

The corporation underwent a drastic and hostile turnover of directors and for period of time the corporate minutes and records were in chaos.

Thank you for your anticipated cooperation.

Susana Mawad
Susana Mawad

President

Tourism Wholesalers
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Coral Gables, Florida 33134
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