FILE NOW: FILING FEE AFTER MAY 1ST IS \$50 J. L J

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthain.

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

21

22

23

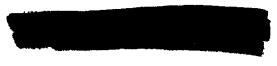
City & State

Zip

P97000071243 (4)

SOFISEB U.S.A., INC. Principal Place of Business Mailing Address 265 SUNRISE AVENUE 265 SUNRISE AVENUE SUITE 204 SUITE 204 PALM BEACH FL 33480 PALM BEACH FL 33480

FILED Jul 27 1998 8:00am Secretary of State



85

Zip Code

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/15/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MINTMIRE, DONALD F 265 **SUNRISE AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 204 83 PALM BEACH FL 33480

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

84 City

agent. I am familiar with, and accept the obligations of, Section 607.0505, Fforida Statutés.				
SIGNATURE Signature Typed or product range of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstalling) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	IN 12
TITLE	Preselent · Descetos X DELETE	1111111	President-Director AX Change	Addition
NAME	Derve Guellauma.	1.2 NAME	Herve Guidlaume	
STREET ADDRESS		1.3 STREET ADDRESS	53 Rue Boulanvelliers	
CITY - ST - ZIP	53 Rue Boulewilliers	4.4 CITY-ST-ZIP	75116 Paris, France	
THTLE	Orector 15116 Paris DELETE	2 1 TIFLE	Director-Jacques Rivet XX Change	Addition
NAME	Passies Renet	2 2 NAME	14, Rue de Lorraine	
STREET ADDRESS	14. Rue de Farrage	23 STHEET ADDRESS	8500 La Roches/Lyon, France	
CITY - ST - ZIP	25000 La Roches / Turon 7	alle -		_
TITLE	DELETE	3 I THLE	Treasurer-Regine Aubry	Addition
NAME	Again Milare	32 NAME	16, Rue de la Serpentine	
STREET ADDRESS	Il But to be Strainte	3.5 STREET ADDRESS	44880 Sautron, France	
CITY-ST-ZIP	- SUILORD SALT STO	3.4. CITY - ST - ZIP		_
TITLE	194880 Sauceon Kineman	Ri Tifte	Secretary XX Change L	Addition
NAME	Alfretary, &	4. 2 NAME	Phillippe Olivier	
STREET ADDRESS	Philleppe Oliveer	4.3 STREET ADDRESS	18 Quai du Halleray	
CITY-S1-ZIP	10 Blesi du Kelleray	4.4 CHY- S1 - ZIP	44300 Nantes, France	
TITLE	44 300 Nantes Flance	5.1 TILE	Director-Dominque Thomas Thange	Addition
NAME	44 300 Maries Viano	5.2 NAME	75, Rue de Reveal	,
STREET ADDRESS		5.3 STREET ADDRESS	35000 Rennes, France	
CITY-ST-ZIP		5.4 CITY+ST-ZIP		
TITLE	director 1 DELETE	6 1 101LE	20000260337£nange (Addition
NAME	Done one Thomas	6.2 NAME	-07/31/9801004018	Œ
STREET ADDRESS	15. Rile de Ravise	6.3 STREET ADDRESS	***150.00	7.2.3
CHY-ST-ZIP	35000 Rennes, Tra	COR - ST-ZIP		, 07

14. Thereby 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 port or supplemental annual report is true and accurrence and that my signature shall have the same legal effect as if made under eath, that I am an efficiency director of the portation or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual port or supplemental annual report is true and accurrence and that my signature shall have the same legal effect as if made under eath, that I am an efficiency of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual port or supplemental annual report is true and accurrence and that my signature shall have the same legal effect as if made under eath, that I am an efficiency of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report is true and accurrence and that my signature shall have the same legal effect as if made under eath, that I am an efficiency of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report is true and accurrence and that my signature shall have the same legal effect as if made under eath, the information indicated in the exemption of th officer or director of the Block 12 or Block 13 in-