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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State * DIVISION OF CORPORATIONS

FILED Mar 31 1998 8:00am Secretary of State

DOCUMENT # P97000074303 (3) UNITED STATES CARIBBEAN & AFRICAN DEVELOPMENT, 1 NC. Principal Place of Business Mailing Address 5715 N. UNIVERSITY DRIVE 5715 N. UNIVERSITY DRIVE TAMARAC FL 33321 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/25/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65.0775438 Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 COMPET, LOUBET 5715 N. UNIVERSITY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33321 83 84 City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PD Addition TITLE ☐ DELETE 1.1 TITLE Change COMPET, LOUBET NAME 1.2 NAME 8901 SUNSET STRIP STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL 33322 CITY-ST-ZIP 14 CITY-ST-ZIP VD DELETE Addition Change TITLE 2.1 TITLE COMPET, MARIE JUDE M NAME 2.2 NAME 8901 SUNSET STRIP STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL 33322 2.4 CITY-ST-ZIP CITY-ST-7IP DELETE TITLE 3.1 TITLE Change Addition JEAN BAPTISTE, FORD NAME 3.2 NAME 7694 S.W. 4TH PLACE STREET ADDRESS 3.3 STREET ADDRESS N. LAUDERDALE FL 33068 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition ST. HILAIRE, RODNEY NAME 4. 2 NAME 325 N.E. 160 TERRACE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33162 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE ST. HILAIRE, PHIPPS REV NAME 5.2 NAME 325 N.E. 160 TERRACE STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL 33162 CITY-ST-ZIP 5 4 CITY - ST - ZIF TITLE DELETE 61 TITLE _ Change Addition PERLMUTTER, ROSALEEN NAME 62 NAME 325N.5 1607e5162 8833 N.W. 48 STREET STREET ADDRESS 6.3 STREET ADDRESS SUNRISE FL 33351 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 report or suppliemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed,

SIGNATURE:

954-7247270