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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9700078968 (9)

MARIO CORTI USA, CORP.

FILED Apr 29 1998 8:00am Secretary of State



Principal Plac	ce of B usines	SS	Mailing Add	Mailing Address				1,000/1000/					
2174 NW 87TH AVENUE			2174 NW 8	2174 NW 87TH AVENUE									
MIAMI FL 33172			MIAMI FL 3	MIAMI FL 33172					DO NOT INDI	E IN THIS SDAO	-		
								3 Data Inco	porated or Qualified	TE IN THIS SPAC	<u> </u>		
								09/1/1	•				
2. Principal P	lace of Busi	ness	2a. Mailing A	2a. Mailing Address				4. FEI Numb			Δ	oplied For	
21			26	}-					782415			ot Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				1 -	•	.	o	Additional	
22			27	27				5. Certificate	of Status Desired	1 1 7 .		equired	
City & Stat	le		City & St	City & State				6. Election C	ampaign Financing	\$	5.00	May Be	
23			28					Trust Fund	I Contribution			to Fees	
Zip		Country	Zip		Country				ration owes or has p				
24	A Name	25	29		30				roperty Tax due Jur			No	
		and Address of Curr	aur wadigraran waa	orat		81	Nar		Address of New R	egistered Agen			
EDENBURG, SIMON 2174 NW 87TH AVENUE													
				[1			Stre	Street Address (P.O. Box Number is Not Acceptable)					
MI	IAMI FL 33°	172				83							
						Ш							
						84	City			FL 85	Zip	Code	
11. Pursuant	to the provis	sions of Sections 607.05	502 and 607,1508. F	lorida Statute	s. the a	boye	e-nam	ed corporation submits t	his statement for the	nurnose of char	l aina it	s registered	
office or r	registered ac	gent, or both, in the Sta ith, and accept the obt	le of Florida. Such c	change was a	uthorize	d by	the c	orporation's board of dire	ectors. I hereby acc	ept the appointm	erit as	registered	
•		m, and aboupt mo our	gonoria on occitor (001.0000,110	nau oto	10100	•						
SIGNATURE	Signature, typoc	or printed name of registered a	gent and bile if applicable	(NO1L	Rogisteru	d Age	nt signa	ure required when reinstating)		DATE			
12.	· · · · ·	OFFICERS A	NO DIRECTORS		13.			ADDITIONS	/CHANGES TO OFF	ICERS AND DIRE	CTOR		
TITLE	D		L] DELETE	1,1 ĭ						hange	Addition	
NAME		URG, SIMON			1.2 N								
STREET ADDRESS	I	W 87TH AVENUE		1.3 STRE									
CITY-ST-ZIP	MIAMI	FL 33172		DELETE	_	114-8	T-ZIP			· —	h	Addition	
TITLE NAME			<u>L</u>	1 DELCTE	2.1 T						hange	☐ Addition	
STREET ADDRESS					2.2 N		40000						
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CITY-ST-ZIP TITLE	-		 	DELETE	3.1 T		31 - ZIP				hange	Addition	
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STREET ADDRESS							ADDRES	<u>;</u>				1	
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TITLE				DELETE	5.1 1	TLE				□ c	hange	Addition	
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CITY-ST-ZIP				Therese		TY-S	T- Z IP						
TITLE			L.] DELETE	6.1 T					L□c	hange	Addition	
NAME					6.2 N								
STREET ADDRESS							ADDRES	5					
CITY-ST-ZIP	certify that th	a information cumplied	with this filing door	not qualify to		ITY-S		ted in Section 119.07(3)	(i) Florida Statutos	I further certify the	of the	information	

officer or director of the corporation supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied 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 of the receiver or trusted 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 or an appear with in address.

CIGNATURE.

/V/20/04 3/15-597-200