1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90012 043 \*\*\*150.00

DOCUMENT # P97000085265  1. Corporation Name	
U.S. FINANCIAL GROUP, INC.	
	A HARA BERGA BERGA BERGARAN B

Principal Place		Mailing Address								
5375 OSPREY STREET COCONUT CREEK FL 33073  5375 OSPREY STREET COCONUT CREEK FL 33073					,					
OCCOMO! ONE	CR 1 C 45010		•			DO NOT WRI	TE IN THIS	SPACE		_
						<ol> <li>Date Incorporated or Qualifed 10/02/1997</li> </ol>	•	•		
2. Principal Place of Business 2a. Mailing Addre						4. FEI Number			Applied For	1
21 2979	U POWER LIVE RO				- RD	59-2867689			Not Applicable	
Suite, Apt.	#, Ac.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		•	5 Additional		
22		27							Required	-
City & State	AND BEACH FL	City & State 28 POM PANO BEACH FC    Zip			<u>_</u>	6. Election Campaign Financing Trust Fund Contribution		•	0 May Be ed to Fees	
23 POM	Country	Zip	Cou	intry		8. This corporation owes the curr	ent vear Inta		<u> </u>	
24 3 300	69 25 BROWAND	29 33069	30 /	3100	1~0	Personal Property Tax.		☐Yes	□No	
- 10 - 0 -	9. Name and Address of Current			<u> </u>		10. Name and Address of New F	Registered A	\gent		
ADD	ulu, roberto			81  Na	ne					
	OSPREY STREET			82 Str	et Addre	ess (P.O. Box Number is Not Accepta	able)			7
	ONUT CREEK FL 33073			83						1
							-	11		4
				84 City			FL	85 Z	ip Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligation	and 607.1508, Florida Statut f Florida. Such change was en- ons of, Section 607.0505, Florida	es, the a authorized orida State	bove-nand by the course	ed corpo orporation	ration submits this statement for the n's board of directors. I hereby accep	purpose of on the appoin	changing tment as	its registered registered	- .
SIGNATORE	Signature, typed or printed name of registered agent		Registered	d Agent signa	ure required	when reinstating)	DATE			_
12.	ØFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS ANI	DIREC	CTORS IN 12	7 2
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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 an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR