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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P97000087887 (0)

LANDCO ENTERPRISES USA, INC.

FILED Feb 25 1998 8:00am Secretary of State



D 1 101					
Principal Place of Business Mailing Address				r santiant ich festi santi antit antit antit antit antit antit antit	LOLIS 1800) IBIBS IBIBS IBBS SADS
924 E. SAMPLE ROAD 924 E. SAMPLE RO. POMPANO BEACH FL 33064 POMPANO BEACH I					
romrand	DENOTIFE 33004	POMPANO BEACH FL	33004	DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·
		,		10/10/1997	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt #, etc		65-0787427	Not Applicable
22	, 0.0	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zipi	Country	8. This corporation owes or has paid the cu	
24	25	29	30		Yes No
	g, Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
F	FILINGS, INC.		81 Name		
3	3732 N.W. 16TH STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
F	FT. LAUDERDALE FL 33311-4132		83		
			83		
			84 City		85 Zip Code
44 Durania	A. th			rporation submits this statement for the purpose calion's board of directors. I hereby accept the app	
SIGNATURE	Signature typed or printed name of registered agent OLFICERS AND		t Registered Agent signature req	oulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTORS IN 12
TITLE	D L'ERROR	DELETE	1) TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	PERROAULT, MARC		1.2 NAME		• —
STREET ADDRESS	924 E. SAMPLE ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33064		1.4 CITY-ST-ZIP		
TITLE	PERREAULT MARC	DELETE	21 TITLE		Change Addition
NAME	924 E. SAMPLE ROA		2 2 NAME		
STREET ADDRESS	Pompauo Brach Fl		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LOW/hatho course er	DELETE	2.4 CITY-ST-7IP		D 43.00
NAME		[] Ottel	3 1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DECETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.9 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	······································	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME PERSET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP		~	6.4 CITY - ST - ZIP		ľ

bes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information t is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied indicated on this annual report or suppliers