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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000102269

1. Corporation Name

PHOENIX ENTERPRISES OF USA, INC.

Principal Place of Business

Mailing Address

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90029 042 ***150.00



11251 SW 12TH FORT LAUDERD		11251 SW 12TH STREET FORT LAUDERDALE FL 33315								RITE IN THIS	SSPACE		
	:						3. Date Inc. 12/04/		or Qualifed	i			
2. Principal Place of Business 2 2a. Mailing Address 20							4. FEI Nun				Ap	plied For	, ,
					n D		65-079		ستت سيادر ت			t Applicable	
21 1145 Suite, Apt. #		26 112 5 1 SW 12 MANOR Suite, Apt. #, etc.									Additional		
22		27				5. Certifcat	e of Statu	s Desired		Fee Re	equired		
City & State		City & State 28 FORT LAYDERDALE				6. Election		-	' _	\$5.00 Added	, ,		
	LA UDERBALE Country	Zip Country					nd Contrib		rrent vear In		10 1 003	l	
Zip 241 333:		29 3 3 3 2 5 30 USA				8. This corporation owes the current year Intangible Personal Property Tax.							
	9. Name and Address of Current	Registered Agent				. 1	10. Name a	nd Addre	ss of New	Registered		7 x, 31.	1
				81	Name							TREAL TIMES	1
	othe, Fernand Se 17th Street		ŀ	82	Street	Street Address (P.O. Box Number is Not Acceptable)							[
	T LAUDERDALE FL 33316											1.00 1.00	ĺ
·					City					F	-	Code	
11. Pursuant t	to the provisions of Sections 607.0502 agistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the ab	ove-	named	corpora	tion submits	this state	ment for th	e purpose C	f changing its	registered	-
office or re	egistered agent, or both, in the State of n familiar with, and accept the obligation	Florida. Such change was authors of, Section 607.0505, Florida	iorized a Statu	by tr tes.	те согра	oration s	Doard of di	ectors. Fr	iereby acc	ebrine appo	Andineni as re	gistered	
		•											ĺ
SIGNATURE Signature, typed or pnnted name of registered agent and title if applicable. (NOTE: Registered A						equired wh				DATE			6
12.			13.			~ .	ADDITIO	NS/CHAN	GES TO O	FFICERS A	ND DIRECTO		(11/98
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CITY-ST-ZiP						ı							,

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:

CITY-ST-ZIP