FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90162 007 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000102738

1. Corporation Name

USA STRATEGIC MARKETING CORPORATION

Principal Flace of Business Mailing Address						1 19211941 114 11511 11511 11511 11515 11515 11511 11511 11511 11511 11511 11511 11511 11511 11511 11511 11511
2550 NW 72 AV	2550 NW 72 AVE. 2550 NW 72 AVE.					
117		117				DO NOT WRITE IN THIS SPACE
MIAMI FL 33122 MI		MIAMI FL 33122	MIAMI FL 33122			3. Date Incorporated or Qualifed
						12/04/1997
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0334246 No: Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23		Zip Country			Tradition of the second	
Zip Country				ı ıu y		8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Curre	29 Agent	1301	Γ		10. Name and Address of New Registered Agent
	3. Name and Address of Curre	I. Neglatered Agein		81	Name	10
AUD	RTE, CAMILO					
	NW 72 AVE.			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)
177				83		
MIAMI FL 33122						
				84	City	FL 85 Zip Code
Ad Durous nt	to the provisions of Systians 607 050	Y and 607 1508 Florida Stati	tes the a	hovi	e-named cu	progration submits this statement for the purpose of changing its registered
l office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized	i by	the corpora	ation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	at ons of, Section 607.0505, F	londa Stati	utes	i.	
SIGNATUFE	Signature, typed or printed name of registered age	and title if applicable (NO	T = Registered	Ager	nt signature regu	irred when reinstating) DATE
12.		NI) DIRECTORS	13.	- 3		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 11	ΠE	$\overline{}$	Change Addition
NAME	DUARTE, CAMILO		1.2 N	ME	İ	
STREET ADDRESS	2550 NW 72 AVE., #117		1.3 57	REET	TADDRESS	
CITY-ST-ZIP	MIAMI FL 33122		14 C			
TITLE	V	☐ DELETE	2.1 TV			☐ Change ☐ Addition
NAME	GARAVITO, EMMA		2.2 №	ME		
STREET ADDRESS	2550 NW 72 AVE., #117		1		TADDRESS	
CITY-ST-ZIP	MIAMI FL 33122		8		ST-ZIP	
TITLE	THE STREET OF THE STREET	DELETE 3.1				Change Addition
NAME		_	32 N/			
STREET ADDRESS					TADDRESS	
CITY-ST-ZIP					ST-ZIP	
TITLE		☐ DELETE	4 1 TI			☐ Change ☐ Addition
NAME			4. 2 N	AME		
STREET ADDRESS					TADDRESS	
CITY-ST-ZIP					T-ZIP	
TITLE		☐ DELETE	5.1 Ti	_	·	☐ Change ☐ Addition
NAME			5.2 N	ME.		
STREET ADDRESS			5.3 ST	REET	TADDRESS	
CITY-ST-ZIP			5.4 CI	TY-S	T-ZIP	
TITLE		DELETE	6.1 TI			☐ Change ☐ Addition
NAME			6.2 N	ME		
STREET ADDRESS			638	REE	T ADDRESS	
CITY OF 710					T-ZIP	

SIGNATURE: _

CITY-ST-ZIP

SIGNATURE AND OR DIRECTOR

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 indicate a 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 the receiver or trustee empowered to effect 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 attactment with an laddest statute.