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 # 1. Corporation Name P97000104722

PIX USA, INC.

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90030 041 ***150.00



Principal Place	e of Business	Mailing Address			THE PERSON NAMED OF THE PE
2601 S. BAYSHORE DRIVE 2601 S. BAYSHORE DRIVE			•		•
SUITE 1250 CONTROL OF THE SUITE SUIT		SUITE 1250 MIAMI FL 33133		DO NOT WRITE IN THIS SPACE	
MINMI LE 2313	.	WICHII I E ANIAA		3. Date Incorporated or Qualifed	
				12/12/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
723	36 N.W. 72 AUE.	26 7236 N.W	72 AUG.	APPLIED FOR	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	See Required
City & Stat	4M1 FL	City & State - 28 MIAMI - FI	• •	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	· Country		Country	8. This corporation owes the curren	nt vear Intangible
24 FL.3		29 33166 30	DADE	Personal Property Tax.	☐ Yes ☐ No
2-1 1 1	9. Name and Address of Current	11		10. Name and Address of New Re	gistered Agent
	Ş-		81 Name 7	PAVID RAN SOME	
FREEWAN, NOBELL'A				dress (P.O. Box Number is Not Acceptab	le)
A 2601 S. BATSHURE DRIVE			723	6 N.W. 72 AVE.	
	TE 1250		83	V 674	
MIAI	MI FL 33133		84 City	iceq.	85 Zip Code
				(1) 1 (1) (1) (1) (1) (1) (1) (1) (1) (1	FL 32166
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1809, Florida Statutes, the	e above-named cor	poration submits this statement for the pion's board of directors. I hereby accept	urpose of changing its registered
office or r	registered agent, or both, in the State (im familiar with, and accept the definat	of Florida: Such change was authori tions of, Section 607.0505, Florida S	zeo by ine corporal tatutes.	don's board of directors, I flereby accept	ille appointment as registered
SIGNATURE	* (Must 11)	Kanson		4/2	6/99
	Signature, typed or printed name of registered agent		ered Agent signature requir		CERS AND DIRECTORS IN 12
12.	OFFICERS AN		13. 1 TITLE I	ADDITIONS/CHANGES TO OFFI	Change Addition
TITLE	D FORTHAN POPENT A	• •	2 NAME	AVID RANSOME	
NAME	FREEMAN, ROBERT A		3 STREET ADDRESS	1236 N.W. 72 AVE.	·
STREET ADDRESS	1			MEDLEY FL. 33166	}
CITY-ST-ZIP	MIAMI FL 33133		4 CITY-ST-ZIP 1		Change Addition
TITLE		_	2 NAME		
NAME					
STREET ADDRESS	- 21		3 STREET ADDRESS	, ·	
CITY-ST-ZIP	,		4 CITY-ST-ZIP		Change Addition
TITLE	manufacture.		2 NAME	and the second s	
NAME			ľ		
STREET ADDRESS			3 STREET ADORESS		
CITY-ST-ZIP			4. CITY-ST-ZIP		Change Addition
TITLE			2 NAME		<u></u>
NAME .			1		• •
STREET ADORESS			3 STREET ADDRESS		1
CITY-ST-ZIP			4 CITY-ST-ZIP		Change ☐ Addition
TITLE	:		2 NAME		
NAME		•	3 STREET ADDRESS	• .	1
STREET ADDRESS					}
	1	·	4 CITY, ST. ZIP	•	1
CITY-ST-ZIP			4 CITY-ST-ZIP	·	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME		☐ DELETE 6	4 CITY-ST-ZIP 1 TITLE 2 NAME	•	Change Addition

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 of the receiver of 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 or an attachment with an address with all other like empowered.

SIGNATURE: