

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

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90025 015 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P98000001241**

1. Corporation Name  
**U.S. HERITAGE HOLDINGS, INC.**



Principal Place of Business 6000 PARK OF COMMERCE BLVD. #A BOCA RATON FL 33487	Mailing Address 6000 PARK OF COMMERCE BLVD. #A BOCA RATON FL 33487
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 01/06/1998	4. FEI Number 65-0812498	Applied For <input type="checkbox"/> Not Applicable
21	26	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
22	27	8. This corporation owes the current year Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		
City & State	City & State			
23	28			
Zip	Country			
24	25			
Country	Zip			
29	30			

9. Name and Address of Current Registered Agent

**REGISTRATION CORPORATION OF FLORIDA, INC.**  
 22422 THOUSAND PINES LANE  
 BOCA RATON FL 33428

10. Name and Address of New Registered Agent

81 Name **Koutsoubos, James**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**6000 Park of Commerce Blvd**  
 83 **Suite A**  
 84 City **Boca Raton** FL 85 Zip Code **33487**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **JAMES KOUTSOUBOS** *James Koutsoubos* DATE **4/26/99**

Signature, typed or printed name of registered agent and title if applicable. NOT: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KOUTSOUBOS, YANNI	
STREET ADDRESS	6000 PARK OF COMMERCE BLVD. #A	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	LAZAR, ALAN P	
STREET ADDRESS	6000 PARK OF COMMERCE BLVD. #A	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JAMES KOUTSOUBOS	
1.3 STREET ADDRESS	6000 PARK OF COMMERCE BLVD.	
1.4 CITY-ST-ZIP	BOCA RATON, FL. 33487	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 a other like empowered.

SIGNATURE: *Yanni Koutsoubos* **YANNI KOUTSOUBOS** DATE **4/26/99** DAYTIME PHONE # **561-994-5400**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)