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 # P98000030300

CLASE A&R USA, INC.

Principal Place	of Business	Mailing Address	Mailing Address						
1731 SW 138 COURT 1731 SW 138 (OURT						
MIAMI FL 33175		MIAMI FL 331/5	WIAMI FL 33175			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						04/02/1998			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Apr	olied For	
21		26				65-0828915	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Cortiforto of Status Docired		dditional	
22		27	_			J. Odvinski di Oktoba Bodina	Fee Red	quired	
City & State	9	City & State				1 1 1	5.00		
23		28					Added to	Fees	
Zìp	Country	Zip	Cour	ıtry		8. This corporation owes the current year Intangible		□No	
24	25	29	30			1 Ciscilar Froperty Tax:		LINO.	
	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Registered Agen			
TAVA	RES, GEORGE M JR, ESQ			۱,	1441110				
407 LINCOLN ROAD STE 708					Street Add	treet Address (P.O. Box Number is Not Acceptable)			
· -	11 FL 33175			83					
IAITA	11 1 2 30 17 3		Ī	84	City	FL ⁸⁵	Zip C	ode	
	the anadalana of Spetions 607.0	E02 and 607 1E09 Elasida Statu	itoe the ab		named con	poration submits this statement for the purpose of chang	aina its	registered	
office or o	egistered agent, or both, in the Sta m familiar with, and accept the obli	e of Florida. Such change was :	authorized	DV I	ine corporati	ion's board of directors. I hereby accept the appointmen	ıt as reç	gistered	
	ili laminar with, and accept the con	judons of, occident our .cood, 1 i	onda otata					J	
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOT	E: Registered /	Agent	signature require	ed when reinstating) DATE			
12.	OFFICERS /	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DI			
TITLE	D	☐ DELETE	1,1 TET	Æ			Change	Addition	
NAME	RAMIREZ, JORGE		1.2 NA	ME				}	
			1.3 STF	REET	ADDRESS				
CITY-ST-ZIP	D.C., COLOMBIA		1.4 CIT	Y-ST-	-ZIP				
TITLE	D	☐ DELETE	2.1 TIT	LE			Change	☐ Addition	
NAME	RAMIREZ, SADY		2.2 NA	ME					
STREET ADDRESS	DIAGONAL 150, #32-40, SAI	ITAFE DE BOGOTA	2.3 STI	REET	ADDRESS				
CITY-ST-ZIP	D.C., COLOMBIA		2, 4 CI	TY-ST	r-zip		<u> </u>		
TITLE	D	☐ DELETÉ	3.1 TIT	LE			Change	Addition	
NAME	BENITEZ, RITA M		3.2 NA	ME		•	•		
STREET ADDRESS	1731 SW 138 COURT		3.3 STI	REET.	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33175	_	3,4, Ci	ry-ST	r-ZIP				
TITLE		☐ DELETE	4.1 TIT	LE			Change	☐ Addition }	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP				
TITLE		☐ DELETÉ	5.1 TIT	LE			Change	☐ Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 STI	REET	ADORESS	•			
CITY-ST-ZIP			5.4 CIT	Y-ST	- ZIP				
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition	
NAME			6.2 NA	ME					

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90156 010 ***150.00

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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 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.

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

305-228 2652