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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000054519**

1. Corporation Name
ALSER AMERICAN CORP.

Principal Place of Business	Mailing Address
4111 47TH AVE. #321 DAVIE FL 33314	4111 47TH AVE. #321 DAVIE FL 33314

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/18/1998

4. FEI Number: 65-0917262 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 4101 SW 47th Ave	26 4101 SW 47th Ave
22 Suite, Apt. #, etc. 105	27 Suite, Apt. #, etc. 105
23 City & State Ft. Lauderdale, Fl	28 City & State Ft. Lauderdale, Fl
24 Zip 33314 25 Country USA	29 Zip 33314 30 Country USA

9. Name and Address of Current Registered Agent

LITMAN, NEAL S ESQ.
2900 SW 28TH TERR, 2ND FL
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	FRANGIPANI, SERGIO	1.2 NAME	
STREET ADDRESS	4111 47TH AVE, #321	1.3 STREET ADDRESS	4101 SW 47th Ave Suite: 105
CITY-ST-ZIP	DAVIE FL 33314	1.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33314
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	SBROLLINI, ALESSANDRO	2.2 NAME	
STREET ADDRESS	4111 47TH AVE, #321	2.3 STREET ADDRESS	4101 SW 47th Ave Suite: 105
CITY-ST-ZIP	DAVIE FL 33314	2.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33314
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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: AMPROCORP U.S.A. INC. President Sergio Frangipani — 04/23/99 — (954) 581-7935
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — OFFICER OR DIRECTOR — Date — Daytime Phone #