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 # P98000078904

1. Corporation Name

FINDIT-USA, INC.

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90066 034 ***150.00



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Principal Place	o of Business	Mailing Address	Mailing Address					Aftic Shirt Land	Bird (211) a	B100 M1\$1 FW\$1	
7203 SPUR CO	URT	7203 SPUR COUR	7203 SPUR COURT								
SARASOTA FL		SARASOTA FL 34	SARASOTA FL 34243				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed	IN THIS SPA	. <u>CE</u>		ì
							1				
		1 2 44 19: 4 11	_ 				09/08/1998 4. FEI Number		TAN	olied For	1
	lace of Business	— ·	2a. Mailing Address				65-0870731			Applicable	
21		26	Suite, Apt. #, etc.				93 0870.01			dditional	ĺ
Suite, Apt. #, etc.			The second second second				5. Certifcate of Status Desired[Fee Rec		-
22			City & State				O Floring Compaign Financing		5.00	·	
City & State		— ·	¬ '				6. Election Campaign Financing Trust Fund Contribution		Added to		
23	Country	28 Zip									•
Zip		<u> </u>	¬ - · · · · · · · · · · · · · · · · · ·				8. This corporation owes the current year Intangible Personal Property Tax.				
24	25 Same and Address of Curren	29		1			10. Name and Address of New Reg				1
Name and Address of Current Registered Agent						me					
SAR	A, RICHARD D ESQUIRE			L	l						
2033 MAIN STREET, SUITE 303				82	Street	Addre	ss (P.O. Box Number is Not Acceptable	6)			
1	ASOTA FL 34237		i								1
- Orac	ACCIATE CHEST			83							
				84	City			E(8!	Zip C	ode	
		0 1007.4500 51	- Ch-h-d d-			1	retire cubmits this statement for the pu	mose of char	ding its	registered	1
l office or n	egistered agent or both in the State.	of Florida, Such chan	ide was authoriz	eo ov	tne cort	oration	ration submits this statement for the purished accept to	he appointme	nt as reç	jistered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.	0505, Florida St	atutes	i						
SIGNATURE		•									
	Signature, typed or printed name of registered age				nt signature	required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE AND D	BECTO	RS IN 12	1 8
12.		ID DIRECTORS		3.			ADDITIONA/CITATOES TO CITA		Change	Addition	13
TITLE	D ALAN	· 						_		_	
NAME	GORDON, ALAN		1,2 NA/			. 1					13
STREET ADDRESS	7203 SPUR COURT				TADDRESS	•					H
CITY-ST-ZIP	SARASOTA FL 34243			CITY-S	T-ZIP		····		Change	Addition	1 8
TITLE	D	L D		TITLE				ш	Cilaliye	L Addition	
NAME	PISCIOTTA, CHARLES			2 NAME		Ì					Ì
STREET ADDRESS	8875 MISTY CREEK DRIVE			STREE	T ADDRESS	5					
CITY-ST-ZIP	SARASOTA FL-34241	· · ·		4 CITY-S	ST-ZIP_	ļ	* *		Change	Addition	-
TITLE		□ 0		TITLE				П	cuanda		
NAME			3.2	NAME							-
STREET ADDRESS	· ·		3.3	STREE	TADORESS	3					
CITY-\$T-ZIP				I. CITY-S	ST-ZIP	1					┨
TITLE			ELETE 4,1	TITLE		1		Ц	Change	□ Addition	
NAME			4.	2 NAME							
STREET ADDRESS			4.3	STREE	T ADDRESS	3					ļ
CITY-ST-ZIP			4.4	CITY-S	T-ZIP						1
TITLE		<u> </u>		1 TITLE				<u> </u>	Change	☐ Addition	1
NAME	·		5.3	2 NAME		1					1
STREET ADDRESS	<u> </u>		5.3	STREE	T ADDRESS	3					
CITY-ST-ZIP			5.4	CITY-S	T-ZIP	\perp					1
TITLE			ELETE 6.	TITLE					Change	☐ Addition	
NAME			6.2	2 NAME							
				3 STREET ADDRESS							
			6.6	A CITY-S	T. 710						1

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.