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FILED
Mar 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S33812 (6)

1. Corporation Name
LASSER PRESS U.S.A., INC.

Principal Place of Business

591 SW 8TH ST
MIAMI FL 33130
US

Mailing Address

591 SW 8 ST
MIAMI FL 33130-3413
US



2. Principal Place of Business

21 Suite, Apt., #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt., #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

02/25/1991

3a. Date of Last Report

04/09/1996

4. FEI Number

65-0237471

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 has liability for intangible tax under s. 199.032

Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

RAMIREZ, MANUEL J.
1001 S BAY SHORE DR
24 FL W
MIAMI FL 33131

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

(NOTE: Registered Agent's signature required when terminating.)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE ☐ DELETE

NAME
MENENDEZ, GUILLERMO
PRAGA 56, PENTHOUSE
MEJICO

11.2 TITLE ☐ DELETE

NAME
NAVARRO, RENE
7965 NW 64TH ST
MIAMI FL

11.3 TITLE ☐ DELETE

NAME
NAVARRO, VICTORIA
7965 NW 64TH ST
MIAMI FL

11.4 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

11.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

11.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I, on behalf of the corporation, 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.

SIGNATURE:

RENE NAVARRO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/97

Date

Original Phone #

CR2E034 (9/96)