FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR -7 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S78958 (3)

1. Corporation Name
MICRO USA CORP.

Principal Place of Business
8021 N.W. 14TH ST.
MIAMI FL 33126

Mailing Address
8021 N.W. 14TH ST.
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21 7925 N.W 21 St	2a. Mailing Address 26 7925 N.W 21 St
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 miami, FL	City & State 28 miami, FL
Zip 24 33122 Country 25	Zip 29 33122 Country 30 USA

3. Date Incorporated or Qualified: 09/10/1991
3a. Date of Last Report: 06/15/1994
4. FEI Number: 65-0288079 ☑ 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

RODRIGUES, LUCIO M
8021 NW 14 ST
MIAMI FL 33126-8611

10. Name and Address of New Registered Agent

81 Name: RODRIGUES, LUCIO M
82 Street Address (P.O. Box Number is Not Acceptable)
83 7925 N.W. 21 St
84 City: Miami FL 85 Zip Code: 33122

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	PRESIDENT ☑ Change ☐ Addition
NAME	RODRIGUES, LUCIO M	1.2 NAME	RODRIGUES, LUCIO M
STREET ADDRESS	8021 NW 14 ST	1.3 STREET ADDRESS	7925 N.W 21 St
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	miami, FL 33122
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	RODRIGUES, EMMA M	2.2 NAME	
STREET ADDRESS	1645 S MIAMI AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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: EMMA M. RODRIGUES 3/2/95 (305) 599-1920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — CONTROLLER — Date — Daytime Phone #

0133000 CP