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FILED

May 08 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 # V01438 (3)

1. Corporation Name  
OFFICE USA CORP.

Principal Place of Business

6812 N.W. 77TH CT.  
MIAMI FL 33166

Mailing Address

6812 N.W. 77TH CT.  
MIAMI FL 33166-2713



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

12/19/1991

3a. Date of Last Report

03/14/1996

4. FEI Number

65-0307595

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

LEYVA, GIRALDO  
6812 N.W. 77TH CT.  
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

Hector J. Mir

82 Street Address (P.O. Box Number is Not Acceptable)

2655 Le Jeune Road

83 Suite

Suite 1107

84 City

Coral Gables

FL

85 Zip Code

33134

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 fee if applicable

Hector J. Mir

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/97

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME LEYVA, GIRALDO  
STREET ADDRESS 6812 N.W. 77 COURT  
CITY-ST-ZIP MIAMI FL 33166

TITLE DV  
NAME LEYVA, AURELIO A.  
STREET ADDRESS 6812 NW 77 COURT  
CITY-ST-ZIP MIAMI FL 33166

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/V/S  
1.2 NAME LEYVA, GIRALDO  
1.3 STREET ADDRESS 6812 N.W. 77 Court  
1.4 CITY-ST-ZIP Miami, Florida 33166

2.1 TITLE D/P  
2.2 NAME LEYVA, AURELIO A.  
2.3 STREET ADDRESS 6812 N.W. 77 Court  
2.4 CITY-ST-ZIP Miami, Florida 33166

3.1 TITLE AS  
3.2 NAME MIR, HECTOR J.  
3.3 STREET ADDRESS 2655 Le Jeune Road, Suite 1107  
3.4 CITY-ST-ZIP Coral Gables, Florida 33134

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Hector J. Mir  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

(305) 444-0460

Date

Daytime Phone #

CR2E034 (9/96)