FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Feb 12 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5) LIGHTING WORLD, U.S.A., INC. Principal Place of Business Mailing Address C/O JUAN F. GONZALEZ 3191 CORAL WAY, SUITE 1010 C/O JUAN F. GONZALEZ 3191 CORAL WAY. SUITE 1010 MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/06/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0346316 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GONZALEZ, JUAN F. 3191 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1010** 83 **MIAMI FL 33145** Zip Code City 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 regelered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PST DELETE TITLE 1.1 TITLE Change Addition AROIX, JUAN NAME 1.2 NAME 3191 CORAL WAY, # 1010 STREET ADDRESS 1.3 STREET ADDRESS Miami Fl 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE AROIX, JUAN NAME 2.2 NAME 3191 CORAL WAY, # 1010 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE AROIX, ALEIDA NAME 3.2 NAME 3191 CORAL WAY, # 1010 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TOTLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

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 supplienced agreement a course and that my signature shall have the same legal effect as if made under eath; that I em an officer or director of the corriever or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

64 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

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DELETE

Change

Addition