

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 09, 1999 8:00 am
Secretary of State

07-09-1999 90007 023 ***550.00

DOCUMENT # **V34142**

Corporation Name
ASECONES (USA) INC.



Principal Place of Business
C/O 1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES FL 33146

Mailing Address
C/O 1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/06/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0336196	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

LEANO, LUIS C
5220 N.W. 72 AVENUE, BAY 4
MIAMI FL 33166

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

I, 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

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ME	BURSZTYN, BENJAMIN	1.2 NAME	
REET ADDRESS	1500 SAN REMO AVE., SUITE 125	1.3 STREET ADDRESS	
Y-ST-ZIP	CORAL GABLES, FL 33146	1.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	2.1 TITLE	AS (Assistant Sec.) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
ME		2.2 NAME	Leano, Luis C.
REET ADDRESS		2.3 STREET ADDRESS	5220 N.W. 72 Avenue, Bay 4
Y-ST-ZIP		2.4 CITY-ST-ZIP	Miami, FL 33166
LE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ME		3.2 NAME	
REET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ME		4.2 NAME	
REET ADDRESS		4.3 STREET ADDRESS	
Y-ST-ZIP		4.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ME		5.2 NAME	
REET ADDRESS		5.3 STREET ADDRESS	
Y-ST-ZIP		5.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ME		6.2 NAME	
REET ADDRESS		6.3 STREET ADDRESS	
Y-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

[Signature] **LUIS C. Leano**

7/6/99

Date

Daytime Phone #

CR2E034 (5/99)

584860-90007-23
V34142

LAW OFFICES

PACKMAN, NEUWAHL & ROSENBERG

BRUCE BARTON PACKMAN (RETIRED)
MALCOLM H. NEUWAHL
MICHAEL ROSENBERG
DENNIS GINSBURG
ROBERT A. STAMEN
LESLIE A. SHARE
JACK D. FINKELMAN
JOSE L. NUÑEZ
ROBERT F. JACOBOWITZ
SHAWN P. WOLF
NORMA BRENNE VINCENT
JORGE DE LA CRUZ-MUÑOZ

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MARK R. STARKMAN
BERNARD WOLFSON
OF COUNSEL

July 6, 1999

PLEASE REPLY TO:
CORAL GABLES OFFICE

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee FL 32302-1500

RE: Asecones (USA) Inc. (the "Corporation")
Our Client File Number 8109A(a)

Gentlemen:

Enclosed herewith please find the 1999 Profit Corporation Annual Report together with a check in the amount of Five Hundred Fifty (\$550.00) Dollars for the filing fee.

Thank you for your attention to this matter.

Very truly yours,

PACKMAN, NEUWAHL & ROSENBERG

ALINA ARTAMENDI
Legal Assistant

/aa
Enclosures