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

CORPORATION ANNUAL REPORT



PLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT# U3のを12

MAPA OVERSERS U.S.A. DUC

Maling Address

13727 SW 152 Sheet

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MIN	MI	120	33	100	ł

MINMI, FC 33177				3. Date Incorporated or Qualified 05 IF 1992	3a. Date of Last Report		
2. Principal Place of Burniess		2a. Ma ing Add	lress	4. FEI Number Applied 65 - 0345843 Not App			
Saite. Apt. # less:		Suite, Apt. #	t, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Gity & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζφ 24	Country 25	Ζιρ 29	Country 30	This corporation has liability fo Florida Statutes	r intangible tax under s. 199.032, ☐ Yes ☐ No		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			Q1 Nome	. <u> </u>			

MARION & PONS SW 152 Street # 32C 13727 MINJULI FC 33177

(ZEO S BISMY NG BUD # 4920

	MARIN	ନ୍ (JONS		
82	Street Address (P.				11
	13020	SW	152	SMEGT	#3
63	141041		•		

FILED

Mar 31 1997 8:00am

Secretary of State

11.	Pursuar tito the provisions of Sections 607.0502 and 607	.1508, Florida Statutes, the above-nar	med corporation submits this	s statement for the purpose of changing its registere
	office or registered agent, or both, in the State of Horida	Such change was authorized by the	corporation's board of direct	tors. I hereby accept the appointment as registered
	agent. I are tamiliar with, and accept the obligations of, \$	Section 607 0505, Florida Statutes.		
		1	^	3/3/100

SIGNATURE		egistered Agent signature	required when reinslating)	DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	S IN 12
1111	DELETE	1.1 TIFLE		Change	Addition
N.W.	PONS, MISMON E.	1.2 NAME			
STREET ADDRESS	PONS, MARTIN E. 13727 SW 152 Smeel # 325 MILMI, FC 33177	13 STREET ADDRESS			
CdY SL-62	MILMI, FL 33177	1.4 CITY-ST-ZIP			
TITUE	DELETE	2 1 THILE		☐ Change	Addition
NAM:		2.2 NAME			
\$18911.4008555		2.3 STREET ADORESS			
CILV ST 7H		2 4 CITY - \$1 - ZIP			ĺ
10%	DELETE	3 1 THTLE		Change	Addition
1441.4)		3 2 NAME			
STRUET AND RESS.		3.3 STREET ADDRESS			
0 fv 51 70		3.4. CITY - ST - ZIP			
fallf	DELETE	4.1 TPLE		Change	Addition
NAM		4 2 NAME			
STRIFT ASJESTION		4.3 STREET ADDRESS			
(d) 8 72		4.4 CiTY - ST - ZIP			
1011	DELETE	5 1 TITLE		Change	Addition
HEM!		52 NAME .			
STEEL ADD 15		5.3 STREET, ADDRESS	500002	129425 -01006032	
Ciris ale		5.4 CiTY - ST - ZIP	-04/01/97	-01006032	
TITLE	CH CHEFE	6.1 TITLE	***165.00	Change	Ado tion
1.09%		6.2 NAME			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
5.58(3.5.5)(3.5.5)		63 STREET ADDRESS		(<i>የ</i> ኒሊሲ
t, 15 - 50 - 70		64 CITY-ST-ZIP			- JA

14. 4 do sirreby coday if at 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 in a subset on this armuel 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 armuel officer or direction 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 Brock 12 or Brock 13 if changed priori an attachment with an address.

SIGNATURE:

AND THE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR