SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 JUL -6 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 JUL 6 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V37979** **(4)**

1. Corporation Name
CONSULTING SERVICES (U.S.A.) INC.

Principal Place of Business
888 SE 3RD AVE
SUITE 400
FT LAUDERDALE FL 33316

Mailing Address
C/O REJEAN LAPIERRE
7800 W OAKLAND PK BLVD "G"
SUNRISE FL 75013
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/21/1992**
3a. Date of Last Report: **05/24/1994**

21 — 2a. Mailing Address 26
Suite Apt # etc. 22 — Suite Apt # etc. 27
City & State 23 — City & State 28
24 25 29 30

4. FEI Number: **65-0333521**
Applied For / Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. ☐ **$5.00** May Be Added to Fees
8. Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
BEHAR, LARRY J PA
888 SE 3RD AVE
SUITE 400
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent
81 Name
82 (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

12. OFFICERS AND DIRECTORS

Title	P
Name	MIEGE, JEAN C
Street Address	8 PLACE RUNGIS
City, St, Zip	PARIS FN 75043

13. ☐ Change ☐ Addition

CR2E034 (3/95)

14. I hereby certify that the information indicated on this report or supplemental 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 above with an office held or title.

SIGNATURE: 6 14 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

007M95 CP