

**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. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL 27 AM 9:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V64257 (1)

1. Corporation Name  
PUBLICIDADES U.S.A., INC.

Principal Place of Business: ~~9300 S. DADELAND BLVD. SUITE 404 MIAMI FL 33156~~  
Mailing Address: ~~9300 SW 153RD AV RD #315 MIAMI FL 33163~~  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/16/1992  
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business: 21 601 BRICKELL KEY DR. 22 # 1080 23 MIAMI 24 33131  
2a. Mailing Address: 26 601 BRICKELL KEY DR. 27 SUITE 1080 28 MIAMI, FL 29 33131 30 USA

4. PEI Number: 65-0360023  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Florida Franchise Fee:  \$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent:  
~~SALCEDO, FRANCISCO  
9300 S. DADELAND BLVD.  
SUITE 404  
MIAMI FL 33156~~

10. Name and Address of New Registered Agent:  
81 Name: SALCEDO, FRANCISCO  
82 Street Address (P.O. Box Number is Not Acceptable): 601 BRICKELL KEY DR.,  
83 SUITE 1080  
84 City: MIAMI FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, 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 the provisions of Sections 607.0502 and 607.1501, Florida Statutes.

SIGNATURE: *[Signature]*

6/2/95

12. OFFICERS AND DIRECTORS

1. TITLE: D	2. NAME: SALCEDO, FRANCISCO	3. STREET ADDRESS: 9300 S. DADELAND BLVD	4. CITY, ST, ZIP: MIAMI FL
5. TITLE:	6. NAME:	7. STREET ADDRESS:	8. CITY, ST, ZIP:
9. TITLE:	10. NAME:	11. STREET ADDRESS:	12. CITY, ST, ZIP:
13. TITLE:	14. NAME:	15. STREET ADDRESS:	16. CITY, ST, ZIP:
17. TITLE:	18. NAME:	19. STREET ADDRESS:	20. CITY, ST, ZIP:
21. TITLE:	22. NAME:	23. STREET ADDRESS:	24. CITY, ST, ZIP:
25. TITLE:	26. NAME:	27. STREET ADDRESS:	28. CITY, ST, ZIP:
29. TITLE:	30. NAME:	31. STREET ADDRESS:	32. CITY, ST, ZIP:
33. TITLE:	34. NAME:	35. STREET ADDRESS:	36. CITY, ST, ZIP:
37. TITLE:	38. NAME:	39. STREET ADDRESS:	40. CITY, ST, ZIP:

13. OFFICERS AND DIRECTORS

1. TITLE: D P/E/T	2. NAME: SALCEDO, FRANCISCO J.	3. STREET ADDRESS: 601 BRICKELL KEY DR. # 1080	4. CITY, ST, ZIP: MIAMI, FL 33131
5. TITLE:	6. NAME:	7. STREET ADDRESS:	8. CITY, ST, ZIP:
9. TITLE:	10. NAME:	11. STREET ADDRESS:	12. CITY, ST, ZIP:
13. TITLE:	14. NAME:	15. STREET ADDRESS:	16. CITY, ST, ZIP:
17. TITLE:	18. NAME:	19. STREET ADDRESS:	20. CITY, ST, ZIP:
21. TITLE:	22. NAME:	23. STREET ADDRESS:	24. CITY, ST, ZIP:
25. TITLE:	26. NAME:	27. STREET ADDRESS:	28. CITY, ST, ZIP:
29. TITLE:	30. NAME:	31. STREET ADDRESS:	32. CITY, ST, ZIP:
33. TITLE:	34. NAME:	35. STREET ADDRESS:	36. CITY, ST, ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 13 or is changed, or on an attached page, with an address.

SIGNATURE: *[Signature]*

6/2/95

*[Signature]*

CP2E034 (3/95)