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May 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J46232

(1)

1. Corporation Name  
OCALANDIA, INC.

Principal Place of Business  
% A. ROSEMARY SALA, P.A.  
104 CRANDON BLVD., STE. 302  
KEY BISCAINE FL 33149

Mailing Address  
% A. ROSEMARY SALA, P.A.  
104 CRANDON BLVD., STE. 302  
KEY BISCAINE FL 33149-1542



3. Date Incorporated or Qualified 12/08/1986  
3a. Date of Last Report 03/08/1996

2. Principal Place of Business  
21 328 CRANDON BLVD  
Suite, Apt. #, etc.  
22 Suite 202  
City & State  
23 Key Biscayne, FLORIDA  
Zip Country  
24 33149 25 USA  
2a. Mailing Address  
26 328 CRANDON BLVD  
Suite, Apt. #, etc.  
27 Suite 202  
City & State  
28 Key Biscayne, FLORIDA  
Zip Country  
29 33149 30 USA

4. FEI Number NOT APPLICABLE  
Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$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  
SALA, ROSEMARY A.  
104 CRANDON BLVD.  
SUITE 302  
KEY BISCAINE FL 33149

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is not Acceptable)  
83 Suite 202  
84 City Key Biscayne FL 85 Zip Code 33149

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 DATE  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE PSD  
NAME SALA, A. ROSEMARY  
STREET ADDRESS 104 CRANDON BLVD., #302  
CITY-ST-ZIP MIAMI FL  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 328 CRANDON BLVD, Suite 202  
1.4 CITY-ST-ZIP Key Biscayne FLORIDA 33149  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME 500002189195  
5.3 STREET ADDRESS -05/23/97--01005--023  
5.4 CITY-ST-ZIP \*\*\*165.00  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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: 4-29-97 361-0105  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)