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FILED
Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J87280** (0)
1. Corporation Name
MAXHALL INTERNATIONAL, INC.



Principal Place of Business: **8033 N.W. 36TH STREET, SUITE 440 MIAMI FL 33168**
Mailing Address: **8033 N.W. 36TH STREET, SUITE 440 MIAMI FL 33168-6644**

3. Date Incorporated or Qualified: **08/14/1987**
3a. Date of Last Report: **03/28/1996**
4. FEI Number: **59-2835999**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 Suite, Apt #, etc.; 27 City & State; 28 Zip; 29 Country; 30

9. Name and Address of Current Registered Agent
**ISICOFF, ERIC D ESQ.
1101 BRICKELL AVENUE
SUITE 704
MIAMI FL 33131**

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: **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RIBADENEIRA, DIEGO	
STREET ADDRESS	8033 N.W. 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33168	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	RIBADENEIRA, MARIO	
STREET ADDRESS	8033 N.W. 36TH STREET	
CITY-ST-ZIP	MIAMI FL 33168	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	RIBADENEIRA, DANIELA	
STREET ADDRESS	8033 NW 36 ST. STE. 440	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DANIELA RIBADENEIRA	
1.3 STREET ADDRESS	8033 NW 36TH ST.	
1.4 CITY-ST-ZIP	SUITE 440 MIAMI, FL 33168	
2.1 TITLE	S/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	GEORGINA MENENDEZ	
2.3 STREET ADDRESS	8033 N.W. 36TH ST.	
2.4 CITY-ST-ZIP	SUITE 440 MIAMI, FL 33168	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Daniela Ribadeneira
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)