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Mar 06 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 # M57868 (5)
1. Corporation Name
BELIER CORP. OF THE AMERICAS



Principal Place of Business: C/O MARC PARADIS, 1517 SHENANDOAH ST., HOLLYWOOD FL 33020
Mailing Address: C/O MARC PARADIS, 1517 SHENANDOAH ST., HOLLYWOOD FL 33020-2570

3. Date Incorporated or Qualified: 08/20/1987
3a. Date of Last Report: 03/06/1996
4. FEI Number: 65-0004097
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. State, Apt. #, etc.
22. City & State
23. Zip
24. Country
2a. Mailing Address
26. State, Apt. #, etc.
27. City & State
28. Zip
29. Country
30. Country

9. Name and Address of Current Registered Agent
PARADIS, MARC
1517 SHENANDOAH ST.
HOLLYWOOD FL 33020

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's signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
1. TITLE: P
2. NAME: PARADIS, MARC
3. STREET ADDRESS: 1517 SHENANDOAH
4. CITY-ST-ZIP: HOLLYWOOD FL
5. TITLE: DELETE
6. NAME:
7. STREET ADDRESS:
8. CITY-ST-ZIP:
9. TITLE: DELETE
10. NAME:
11. STREET ADDRESS:
12. CITY-ST-ZIP:
13. TITLE: DELETE
14. NAME:
15. STREET ADDRESS:
16. CITY-ST-ZIP:
17. TITLE: DELETE
18. NAME:
19. STREET ADDRESS:
20. CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11. TITLE: Change Addition
12. NAME:
13. STREET ADDRESS:
14. CITY-ST-ZIP:
15. TITLE: DIRECTOR Change Addition
16. NAME: MARC PARADIS JR.
17. STREET ADDRESS: 4170 47TH ST #8
18. CITY-ST-ZIP: MONTREAL, QUE H1Z1L7
19. TITLE: DIRECTOR Change Addition
20. NAME: JOSÉE PARADIS
21. STREET ADDRESS: 10605 SAVARD
22. CITY-ST-ZIP: QUEBEC, QUE. G2B2P2
23. TITLE: Change Addition
24. NAME:
25. STREET ADDRESS:
26. CITY-ST-ZIP:
27. TITLE: Change Addition
28. NAME:
29. STREET ADDRESS:
30. 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: _____ DATE: 7/5/97 TELEPHONE: (954) 977-6749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)