

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Apr 08 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 # P94000027054 (3)

**1. Corporation Name
REGUATES CORPORATION**



Principal Place of Business: 777 BRICKELL AVE. SUITE 1020 MIAMI FL 33131
Mailing Address: 777 BRICKELL AVE. SUITE 1020 MIAMI FL 33131-2809

3. Date Incorporated or Qualified 04/08/1994	3a. Date of Last Report 04/16/1996
4. FEI Number 65-0481619	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 State, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent
**FERDIE, ANSLEE R
717 PONCE DE LEON BLVD.
SUITE 215
CORAL GABLES FL 33134**

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

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

<input type="checkbox"/> DELETE	11 TITLE
D	12 NAME
URRUELA, JUAN F	13 STREET ADDRESS
777 BRICKELL AVE., #1020	14 CITY-ST-ZIP
MIAMI FL 33131	21 TITLE
<input type="checkbox"/> DELETE	22 NAME
D	23 STREET ADDRESS
URRUELA, ESTELA M	24 CITY-ST-ZIP
777 BRICKELL AVE., #1020	31 TITLE
MIAMI FL 33131	32 NAME
<input type="checkbox"/> DELETE	33 STREET ADDRESS
<input type="checkbox"/> DELETE	34 CITY-ST-ZIP
<input type="checkbox"/> DELETE	41 TITLE
<input type="checkbox"/> DELETE	42 NAME
<input type="checkbox"/> DELETE	43 STREET ADDRESS
<input type="checkbox"/> DELETE	44 CITY-ST-ZIP
<input type="checkbox"/> DELETE	51 TITLE
<input type="checkbox"/> DELETE	52 NAME
<input type="checkbox"/> DELETE	53 STREET ADDRESS
<input type="checkbox"/> DELETE	54 CITY-ST-ZIP
<input type="checkbox"/> DELETE	61 TITLE
<input type="checkbox"/> DELETE	62 NAME
<input type="checkbox"/> DELETE	63 STREET ADDRESS
<input type="checkbox"/> DELETE	64 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 unchanged, or on an attachment with an address.

SIGNATURE: *Sandra Mortham* *Juan Urruela* **4/1/97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** Daytime Phone # **0172357**

CR2E034 (9/96)