FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 5:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000069561 (6)

1. Corporation Name
PORTOROTILE, INC.

Principal Place of Business
3018 N.W. 79TH AVE.
MIAMI FL 33122

Mailing Address
3018 N.W. 79TH AVE.
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/21/1994
3a. Date of Last Report:

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

4. FEI Number: [X] 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent
HEVIA, JORGE JR
1149 S.W. 27TH AVE.
#301
MIAMI FL 33135

10. Name and Address of New Registered Agent
81 Name: VERAS PEDRO
82 Street Address (P.O. Box Number is Not Acceptable): 3018 N.W. 79 AV.
83 MIAMI, FL.
84 City: FL
85 Zip Code: 33122

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: X [signature] X 5/3/95
Signature of Name of Registered Agent and Signature of Corporation — NOTE: Registered Agent signature required when resigning — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	[ ] Change [ ] Addition
NAME	DELFINO, ALFREDO	1.2 NAME	
STREET ADDRESS	3018 N.W. 79TH AVE.	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33122	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	[ ] Change [ ] Addition
NAME	MURMANN, ROLAND	2.2 NAME	
STREET ADDRESS	3018 N.W. 79TH AVE.	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33122	2.4 CITY, ST, ZIP	
TITLE	SD	3.1 TITLE	[ ] Change [ ] Addition
NAME	VERAS, PEDRO	3.2 NAME	
STREET ADDRESS	3018 N.W. 79TH AVE.	3.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33122	3.4 CITY, ST, ZIP	
TITLE	T	4.1 TITLE	[ ] Change [ ] Addition
NAME	DELFINO, ALFREDO	4.2 NAME	
STREET ADDRESS	3018 N.W. 79TH AVE.	4.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33122	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

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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)(k), 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: X [signature] PEDRO VERAS X 5/3/95 X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Telephone (Please) [signature]

0119687 CP