

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000032135 (2)

1. Corporation Name

THE MERKARE GROUP, INC.



Principal Place of Business

Mailing Address

~~1400-A SUNBANK INTERNATIONAL CENTER~~
~~ONE SE 3RD AVE~~
~~MIAMI FL 33131~~

~~1400-A SUNBANK INTERNATIONAL CENTER~~
~~ONE SE 3RD AVE~~
~~MIAMI FL 33131~~

2. Principal Place of Business

2a. Mailing Address

21 7801 CORAL WAY

26 7801 CORAL WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #102

27 #102

City & State

City & State

23 MIAMI, FL. 33

28 MIAMI

Zip

Zip

Country

Country

24 33155

25

29 FL

30

33155

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~CORROLITE CORPORATION~~
~~1400-A SUNBANK INTERNATIONAL CENTER~~
~~ONE SE 3RD AVE~~
~~MIAMI FL 33131~~

81 Name GUSTAVO FONTE PHD
82 Street Address (P.O. Box Number is Not Acceptable) 11465 S.W. 110TH LANE
83
84 City MIAMI FL 85 Zip Code 33176

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)

2/29/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	DELETE
NAME	PEREZ-CERNUDA, SUZETTE	
STREET ADDRESS	7801 CORAL WAY, 102	
CITY - ST - ZIP	MIAMI FL 33155	
TITLE	VIC PRESIDENT	DELETE
NAME	GUSTAVO FONTE	
STREET ADDRESS	11465 S.W. 110 LANE	
CITY - ST - ZIP	MIAMI, FL. 33176	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	PRESIDENT	Change	Addition
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96

(305) 262-8430

CR2E034 (12/95)