

5-12-97 13- 6996 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000018098 (9)

1. Corporation Name

DAYCO OF SOUTH FLORIDA CORP.

Principal Place of Business

GREGORY R. FRANCUZ
848 BRICKELL AVENUE, SUITE 810
MIAMI FL 33131

Mailing Address

GREGORY R. FRANCUZ
848 BRICKELL AVENUE, SUITE 810
MIAMI FL 33131-2943



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/27/1996	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0650024	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired X	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

FRANCUZ, GREGORY R
848 BRICKELL AVENUE
SUITE 810
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
FL	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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D.P
NAME	D'AGOSTINO, FRANCO	1.2 NAME	
STREET ADDRESS	848 BRICKELL AVENUE, SUITE 810	1.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI FL 33131	1.4 CITY- ST- ZIP	
TITLE		2.1 TITLE	VP
NAME		2.2 NAME	Luis Alfredo D'Agostino
STREET ADDRESS		2.3 STREET ADDRESS	848 Brickell Ave., Ste 810
CITY- ST- ZIP		2.4 CITY- ST- ZIP	Miami, FL 33131
TITLE		3.1 TITLE	VP
NAME		3.2 NAME	Luis Lamar
STREET ADDRESS		3.3 STREET ADDRESS	848 Brickell Ave., Ste 810
CITY- ST- ZIP		3.4 CITY- ST- ZIP	Miami, FL 33131
TITLE		4.1 TITLE	VP/T/AS
NAME		4.2 NAME	Francisco D'Agostino
STREET ADDRESS		4.3 STREET ADDRESS	848 Brickell Ave., Ste 810
CITY- ST- ZIP		4.4 CITY- ST- ZIP	Miami, FL 33131
TITLE		5.1 TITLE	S
NAME		5.2 NAME	Gregory R. Francuz
STREET ADDRESS		5.3 STREET ADDRESS	848 Brickell Ave., Ste 810
CITY- ST- ZIP		5.4 CITY- ST- ZIP	Miami, FL 33131
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregory R. Francuz 2/28/97 (305) 377-8333

CR2E034 (9/96)