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May 01, 1999 8:00 am
Secretary of State

05-01-1999 90046 012 ***158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000021017

1. Corporation Name
MINERA MASVIDAL, INC.



Principal Place of Business 11105 SW 133 CT SUITE 416 MIAMI FL 33186 US	Mailing Address P.O. BOX 143557 CORAL GABLES FL 33114-3557 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/07/1996
4. FEI Number APPLIED FOR
5. Certificate of Status Desired <input checked="" 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 owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business 21 2655 LE SEUNE ROAD	2a. Mailing Address 26
22 Suite, Apt. #, etc. 500	27 Suite, Apt. #, etc.
23 City & State CORAL GABLES, FLA	28 City & State
24 Zip 33134	25 Country
29 Zip	30 Country

9. Name and Address of Current Registered Agent

DIAZ-MASVIDAL, ALBERTO
 11105 SW 133 CT
 SUITE 416
 MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name DIAZ MASVIDAL ALBERTO
82 Street Address (P.O. Box Number is Not Acceptable) 2655 LE SEUNE ROAD
83 SUITE 500
84 City CORAL GABLES
85 State FL
86 Zip Code 33134

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]* **DIAZ MASVIDAL ALBERTO** DATE: **4/27/99**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD DIAZ-MASVIDAL, ALBERTO 11105 SW 133 CT MIAMI FL 33186	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]* **DIAZ MASVIDAL ALBERTO** DATE: **4/27/99** DAYTIME PHONE #: **388-5400**

Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (1/98)