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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000055820 (0)

GALEB INTERNATIONAL, INC.



Principal Place of Business: 4396 INDEPENDENCE COURT SARASOTA FL 34234
Mailing Address: 4396 INDEPENDENCE COURT SARASOTA FL 34234-4711

3. Date Incorporated or Qualified: 06/28/96
3a. Date of Last Report: [blank]
4. FEI Number: 65-0672104
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 [] No

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

9. Name and Address of Current Registered Agent
EVANS, JAMES M
4396 INDEPENDENCE COURT
SARASOTA FL 34234

10. Name and Address of New Registered Agent
81 Name: JAMES M. EVANS
82 Street Address (P.O. Box Number is Not Acceptable):
83 4396 INDEPENDENCE COURT
84 City: SARASOTA FL 85 Zip Code: 34234

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 of 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] DATE: 4-29-97
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: CD
1.2 NAME: EVANS, JAMES M.
1.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
1.4 CITY-ST-ZIP: SARASOTA, FL 34234
2.1 TITLE: YTD
2.2 NAME: EVANS, JAMES M.
2.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
2.4 CITY-ST-ZIP: SARASOTA, FL 34234
3.1 TITLE: VSD
3.2 NAME: EVANS, JON C.
3.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
3.4 CITY-ST-ZIP: SARASOTA, FL 34234
4.1 TITLE: VD
4.2 NAME: YOST, BRIAN R.
4.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
4.4 CITY-ST-ZIP: SARASOTA, FL 34234
5.1 TITLE: PD
5.2 NAME: HEINLEIN, C. DOUGLAS
5.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
5.4 CITY-ST-ZIP: SARASOTA, FL 34234
6.1 TITLE: VD
6.2 NAME: TINDAL, STEVEN L.
6.3 STREET ADDRESS: 4396 INDEPENDENCE COURT
6.4 CITY-ST-ZIP: SARASOTA, FL 34234

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] DATE: 4/29/97 (941)358-8669

(941) 358-8669