## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

13 if changed, or on his attachment with an address.

-Orbitalli-, Silvano Santi

ME OF SIGNING OFFICER OR DIRECTOR

4/15/97

(305)371-2618

Daytimo Phone #

appears in Block 12 or Bloo

SIGNATURE:

60 S.W. 8TH STREET

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

80 S.W. 8TH STREET



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 12 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000085399 (9)

RAY EQUIPMENT U.S.A., INC.

**SUITE 2055 SUITE 2055** MIAMI FL 33130 MIAMI FL 33130-3003 3. Date Incorporated or Qualified 3a. Date of Last Report 10/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0706384 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Ζıρ Country Zφ Country This corporation has liability for intangible tax under s. 199.032, 29 30 Florida Statutes Yes No 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 COSTABEL, ATTILIO M 80 S.W. 8TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 2014** 83 MIAM! FL 33130 84 City 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 applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of changing its registered agent. I am applied to the purpose of chan Attilio M.Costabel SIGNATURE (NOTE: Registered Agent signature required when reinstating) ame of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) 12. 13. DELETE 11 TITLE Change Addition THE SANTI, ING. SILVANO MALIE 1.2 NAME **2E034** VIA 1 MAGGIO N. 3, 40044 PONTECCHIO 51REET AFORESS 13 STREET ADDRESS MARCONI, BOLOGNA (ITALY) 14 City - ST-ZIP C(1) Y - \$1 - 20 Change TITLE DELETE 21 TITLE Addition 22 NAME NAME STREET ADDRESS 2 3 STREET ADDRESS 2 4 City-ST-ZIP CRY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STEERL ADDRESS CHY ST-7P 3.4, CITY - \$1 - ZIP DELETE Addition 100 F 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - \$1 - 20P DELETE Addition 5 1 III F TOTAL 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CHTY-ST-ZIF C(TY - S1 - 7)P TILLE DELETE. 6.1 TITLE Change Addition **6.2 NAME** NARO **6.3 STREET ADDRESS** CHTY - S1 - ZH 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 oil not corporation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name