

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000050768 (1/1)
1. Corporation Name: ONIEL GRAVERAN, INC.

Principal Place of Business: PO Box 650442 MIAMI FL 33265 US
Mailing Address: PO Box 650442 MIAMI FL 33265 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 6/7/97

4. FEI Number: 65-0760511

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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

2. Principal Place of Business (21-23)
2a. Mailing Address (26-28)

9. Name and Address of Current Registered Agent
ONIEL GRAVERAN
13242 NW 10 TE
MIAMI FL 33182

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 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for 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 607.0605, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 04/27/98

12. OFFICERS AND DIRECTORS

1. ONIEL GRAVERAN, President, 13242 NW 10 TE, MIAMI FL 33182

2. MIRIAM SENOR, SIT, 13242 NW 10 TE, MIAMI FL 33182

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. SIT Michael P. Rubio, 13356 NW 8 LANE, MIAMI FL 33182

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***150.00

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 supplementary 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: 4/27/98

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