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May 06 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 # V25963 (2)
 1. Corporation Name
1734 PERUVIAN CORPORATION



Principal Place of Business: **MENDOZA, CALLAS & SCHILLING 6TE 209 PALM BEACH FL 33480 US**
 Mailing Address: **MENDOZA, CALLAS & SCHILLING 6TH FLOOR PALM BEACH FL 33480 US**

3. Date Incorporated or Qualified: **03/31/1992**
 3a. Date of Last Report: **02/22/1996**
 4. FEI Number: **65-0369513**
 Applied For: Not Applicable
 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: **c/o Mendoza, Callas & Schilling**
 21. Suite, Apt. #, etc.: **251 Royal Palm Way, #602**
 22. City & State: **Palm Beach, FL**
 23. Zip: **33480** Country: **USA**

9. Name and Address of Current Registered Agent
DE MENDOZA, MARIO G III
251 ROYAL PALM WAY, 6TH FLOOR
PALM BEACH FL 33480

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: _____ (NOTE: Registered Agent signature required when reissuing) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	IRONS, G C	
STREET ADDRESS	251 ROYAL PALM WAY, 6TH FL.	
CITY - ST - ZIP	PALM BEACH FL	
TITLE	ASV	<input type="checkbox"/> DELETE
NAME	DE MENDOZA, MARIO G III	
STREET ADDRESS	251 ROYAL PALM WAY, 6TH FL.	
CITY - ST - ZIP	PALM BEACH FL 33480	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	WILKINSON, DEBRA	
STREET ADDRESS	251 ROYAL PALM WAY, 6TH FL.	
CITY - ST - ZIP	PALM BEACH FL 33480	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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 checked="" type="checkbox"/> Addition
4.2 NAME	VICE PRESIDENT
4.3 STREET ADDRESS	KROEGER, BARBARA
4.4 CITY - ST - ZIP	c/o MENDOZA 251 ROYAL PALM WAY, PALM BEACH, FLA.
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 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: **G. Chester Irons** **4/28/97** 407/876-2418

CR2E034 (9/96)