

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT #
1. Corporation Name

P95000035986

FEDERAL INTERNATIONAL LTD., INC.

Principal Place of Business

Mailing Address

1920 N.W. 49th Avenue
Miami, Florida 33172

1920 N.W. 94th Avenue
Miami, Florida 33172

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		5/08/95		5/08/95	
22		27		4. FE Number		XX-added For	
23		28		65-0580831		Prior Application	
24		29		5. Certificate of Status Desired		S8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution		S5.00 May Be Added to Fees	
26		31		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes		Yes No	
27		32		33131		USA	

9. Name and Address of Current Registered Agent

Eduardo Fernandez
501 Brickell Key Drive
Suite 400
Miami, Florida 33131

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box No.)
83	City
84	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, and I am authorized to accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent required when transferring

Signature of Registered Agent required when transferring

Signature

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	DELETE	1.1 TITLE	Change Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-STATE-ZIP		1.4 CITY-ST-ZIP	
TITLE	DELETE	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		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

CR2E034 (9/96)