

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

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 606931 (4)
1. Corporation Name
ADRIAN INVESTMENT CORPORATION



Principal Place of Business
2460 S.W. 137TH AVENUE
SUITE 238
MIAMI FL 33175

Mailing Address
C/O MARGIA B. CABALLERO Carmen Ochoa
2460 SW 137 AVENUE, #226 238
MIAMI FL 33175-6888
US

3. Date Incorporated or Qualified 01/17/1979
3a. Date of Last Report 04/05/1996
4. FEI Number 59-1901684
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 Country
24 33175 USA

2a. Mailing Address
26 2460 S.W. 137 Ave.
27 Suite 226
28 Miami, Florida
29 33175 USA

9. Name and Address of Current Registered Agent
CABALLERO, MARCIA B ESQ.
2450 SW 137 AVENUE
SUITE 221
MIAMI FL 33175

10. Name and Address of New Registered Agent
81 Name Richard A. Alayon, Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 2450 S.W. 137 Avenue
83 Suite 226
84 City Miami FL 85 Zip Code 33175

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE 4/29/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADRIAN, PEDRO	1.2 NAME	
STREET ADDRESS	2460 S.W. 137TH AVE #238	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADRIAN, ALVARO L.	2.2 NAME	
STREET ADDRESS	2460 S.W. 137TH AVE #238	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADRIAN, PEDRO J.	3.2 NAME	
STREET ADDRESS	2460 S.W. 137TH AVE #238	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	ASB	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADRIAN, ADRIA	4.2 NAME	
STREET ADDRESS	2460 S.W. 137TH AVE #238	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-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 *[Signature]* DATE 4/29/97 (205) 271-1515

CR2E034 (9/96)