


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

FILED
Jan 21 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 # 620011 (7)
1. Corporation Name
POLOMAR, INC.

Principal Place of Business 9745 S.W. 128TH STREET MIAMI FL 33176 US	Mailing Address 9745 S.W. 128TH STREET MIAMI FL 33176 US
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/09/1979	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1961007	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

POLO, CARLOS G
9745 S.W. 128TH STREET
MIAMI FL 33176

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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

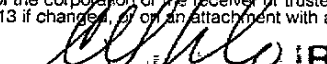
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	POLO, CARLOS G	1.2 NAME	
STREET ADDRESS	9745 S.W. 128TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	POLO, CARLOS A	2.2 NAME	
STREET ADDRESS	12725 S.W. 8TH LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33182	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	
NAME	POLO, MARGARITA H	3.2 NAME	
STREET ADDRESS	9745 S.W. 128TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	VD
NAME	POLO, ANDRES E	4.2 NAME	POLO, ANDRES E.
STREET ADDRESS	11035 SW 152 COURT	4.3 STREET ADDRESS	16403 S.W. 95 LANE
CITY-ST-ZIP	MAIMI FL	4.4 CITY-ST-ZIP	MIAMI, FL. 33196
TITLE		5.1 TITLE	D
NAME		5.2 NAME	POLO-GONZALEZ, MARIA M.
STREET ADDRESS		5.3 STREET ADDRESS	10330 S.W. 154 CIRCLE COURT
CITY-ST-ZIP		5.4 CITY-ST-ZIP	MIAMI, FL. 33186
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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:  CARLOS G. POLO - PRESIDENT JAN 12/98 (305)251-9443

CR2E034 (10/97)