

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 651604 (1)

1. Corporation Name

VENEZOLANA DE INVERSIONES, INC.



Principal Place of Business

1250 SW 27 AVE. STE 306
MIAMI FL 33135

Mailing Address

1250 SW 27 AVE. STE 306
MIAMI FL 33135

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

ROMERO, MARIA M.
1250 SW 27TH AVE. STE. 306
MIAMI FL FL 33135

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Secretary or Director

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

PD
BARBOZA, JOSE RAMON JR
CALLE 73 NO. 17-80
MARACAIBO VENEZUELA

[] DELETE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

TD
BARBOZA, JOSE RAMON
CALLE 73 NO. 17-80
MARACAIBO VENEZUELA

[] DELETE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

SD
PARRA QUINTERO, ANTONIO
AVE 18 EDIF. DNA ANA
MILAGROS ZULIA VENEZUELA

[] DELETE

9. NAME

10. STREET ADDRESS

11. CITY, ST, ZIP

S
BARBOZA, RAMON
CALLE 73 NO. 17-80
MARACAIBO, VENEZUELA

[] DELETE

12. TITLE

13. NAME

14. STREET ADDRESS

15. CITY, ST, ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY, ST, ZIP

20. TITLE

21. NAME

22. STREET ADDRESS

23. CITY, ST, ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

900001758099
-03/26/96--01135--008
***200.00

M.M.
3-18-96

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director
Antonio Quintero Parra

Secretary 2/12/96 649-2233 (305) 872-1996

CR2E034 (12/95)

3-26-1996