


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

FILED  
Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **659356** (0)  
1. Corporation Name  
**JULISSA CORPORATION**

Principal Place of Business <b>700 W. 29TH STREET HIALEAH FL 33012</b>	Mailing Address <b>700 W. 29TH STREET HIALEAH FL 33012</b>
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DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Incorporated or Qualified</b> <b>03/14/1980</b>	
<b>21</b>		<b>26</b>		<b>4. FEI Number</b> <b>59-1982998</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>22</b>		<b>27</b>		<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>23</b>		<b>28</b>			
Zip	Country	Zip	Country		
<b>24</b>		<b>29</b>			
	<b>25</b>		<b>30</b>		

<b>9. Name and Address of Current Registered Agent</b>				<b>10. Name and Address of New Registered Agent</b>	
<b>CASANOVA, JESUS 700 W. 29TH STREET HIALEAH FL 33012</b>				<b>81</b>	Name
				<b>82</b>	Street Address (P.O. Box Number is Not Acceptable)
				<b>83</b>	
				<b>84</b>	City
				<b>FL</b>	<b>85</b> 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

<b>12. OFFICERS AND DIRECTORS</b>				<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE	PD			1.1 TITLE			
NAME	CASANOVA, JESUS			1.2 NAME			
STREET ADDRESS	3373 W. 14TH CT.			1.3 STREET ADDRESS			
CITY - ST - ZIP	HIALEAH FL			1.4 CITY - ST - ZIP			
TITLE	STD			2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CASANOVA, NELIDA			2.2 NAME			
STREET ADDRESS	3373 W. 14TH CT.			2.3 STREET ADDRESS			
CITY - ST - ZIP	HIALEAH FL			2.4 CITY - ST - ZIP			
TITLE	VP			3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CASANOVA, JAVIER			3.2 NAME			
STREET ADDRESS	3400 W. 14 CT.			3.3 STREET ADDRESS			
CITY - ST - ZIP	HIALEAH FL 33012			3.4 CITY - ST - ZIP			
TITLE	VP			4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CASANOVA, JESUS			4.2 NAME			
STREET ADDRESS	83 SE. 23 ST.			4.3 STREET ADDRESS			
CITY - ST - ZIP	HIALEAH FL 33010			4.4 CITY - ST - ZIP			
TITLE				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				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 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 in an attachment with an address.

SIGNATURE:

**SIGNATURE REQUIRED**

1/13/98 305-8859603

CR2E034 (10/97)