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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 820927 (2)

1. Corporation Name
OMC LATIN AMERICA/CARIBBEAN, INC.

Principal Place of Business 100 SEA HORSE DRIVE WAUKEGAN ILLINOIS 60085-9195	Mailing Address 100 SEA HORSE DRIVE WAUKEGAN ILLINOIS 60085-2141
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3. Date Incorporated or Qualified 11/29/1967	3a. Date of Last Report 05/01/1996
4. FEI Number 36-2536154	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	V/S/D
NAME	BADDELEY, D J	1.2 NAME	BADDELEY, D.J.
STREET ADDRESS	100 SEA HORSE DR	1.3 STREET ADDRESS	100 SEA HORSE DR.
CITY- ST- ZIP	WAUKEGAN IL	1.4 CITY- ST- ZIP	WAUKEGAN IL 60085
TITLE	CD	2.1 TITLE	
NAME	BOWMAN, H.W.	2.2 NAME	
STREET ADDRESS	100 SEA-HORSE DRIVE	2.3 STREET ADDRESS	
CITY- ST- ZIP	WAUKEGAN IL	2.4 CITY- ST- ZIP	
TITLE	PD	3.1 TITLE	P
NAME	CARTADE, R M	3.2 NAME	CARTADE, R.M.
STREET ADDRESS	403 SAWGRASS COP PKWY	3.3 STREET ADDRESS	403 SAWGRASS CORP PKWY
CITY- ST- ZIP	SUNRISE FL	3.4 CITY- ST- ZIP	SUNRISE FL 33325
TITLE	VS	4.1 TITLE	V/D
NAME	MALOVANY, H.	4.2 NAME	ROMANO, R.S.
STREET ADDRESS	100 SEAHORSE DR	4.3 STREET ADDRESS	100 SEA HORSE DR.
CITY- ST- ZIP	WAUKEGAN IL	4.4 CITY- ST- ZIP	WAUKEGAN IL 60085
TITLE		5.1 TITLE	V/T
NAME		5.2 NAME	PIRES, J.
STREET ADDRESS		5.3 STREET ADDRESS	403 SAWGRASS CORP PKWY
CITY- ST- ZIP		5.4 CITY- ST- ZIP	SUNRISE FL 33325
TITLE		6.1 TITLE	
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 the attachment with an address

SIGNATURE: R.S. ROMANO VICE PRESIDENT AND ASST. SECRETARY

847-689-6200

CR2E034 (9/96)

OMC LATIN AMERICA/CARIBBEAN, INC.
Officers and Directors

Effective:
01/16/97

Officers:

Chairman
President
Vice President and Treasurer
Vice President and Secretary
Vice President and Assistant Secretary
Assistant Secretary

Bowman, H.W.
Cartade, R.M.
Pires, J.
Baddeley, D.J.
Romano, R.S.
Repp, G.G.

Directors:

Chairman

Bowman, H.W.
Baddeley, D.J.
Romano, R.S.