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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **842715**

(5)

1. Corporation Name

LOURMEL S.A., INC.



Principal Place of Business

**155 E. PALMETTO PARK ROAD
BOCA RATON FL 33432**

Mailing Address

**155 E. PALMETTO PARK ROAD
BOCA RATON FL 33432**

3. Date Incorporated or Qualified

03/01/1979

3a. Date of Last Report

03/10/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DANCE, ESTHER B.
155 E. PALMETTO PARK ROAD
BOCA RATON FL 33432**

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 607.1508, 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 date if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
LEISER, GEORGE G.
APARTADO 3788
CARACS 1010, VENEZUE**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
GRAHAM, BERNARD
EDIF PHELPS, VEROES IBAR
CARACAS, VENEZUELA**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
MICHEL, JORGE
APARTADO 202
CARACAS 1010A, VENEZ**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George G. Leiser Pres.

3/18/96

(409) 750-6899

CR2E034 (12/95)