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

PROFIT CORPORATION ANNUAL REPORT



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

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1996
DOCUMENT #

SIGNATURE:

855088

(1)

FAG INTERAMERICANA A.G., INC.

Principal Place	of Business	Mailing Address			ı idürdi idibi dişal bilil galılı balı	# 18 M B I WIF B I D I		JAM BIAIN AIBN IADN
8175 N.W. 12 ST. SUITE #110 MIAMI FL 33126-1828 B175 N.W. 12 ST. SUITE #110 MIAMI FL 33126-1828 MIAMI FL 33126-1828								
					3. Date Incorporated or Qualified 12/23/1982	•		
2. Prinopal Pk 21	ace of Business	2a. Mailing Address 26			4. FEI Number 59-2247941			Applied For
Scale, Apt. #, etc. Suite, Apt. #, etc.							Not Applicable 5 Additional	
22 27				5. Certificate of Status Desired Fee			Required	
City & State Oity & 23 28		Oity & State	ty & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
<i>Ζ</i> φ.	Country	Zip	Country		8. This corporation has liability for int		under s	199.032,
24	25 9. Name and Address of Current R	manufacture and the same and the same and the same and	30		Florida Statutes			
	g, Name and Address of Current A	egistered Agent	81	Name	10. Name and Address of New Het	hararan wa	em	
0.7.0	ODDODATION EVETEM							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82	Street Ad	Address (P.O. Box Number is Not Acceptable)			
	TATION FL 33324		83					
, 5 (1)	711101112 00027		84	0.3			! "	
			64	City		FL	85 2	Ip Code
familiar wit	ed agent, or both, in the State of Florida. th, and accept the obligations of Section Synthes, blief to print a name of repliced agent and	607.0505, Florida Stalutes.			oard of directors. I hereby accept the appoin	ntment as re	gistere	d agent. I am
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFIC		IRECT	ORS IN 12
TOLE	S	☐ DELETE	1. 1 TITLE				Change	Addition
NAM:	LUTRINGER, RICHARD E		1.2 NAME					
STREET ADDRESS	2 OWENOKE PARK		1.3 STREET	ADDRESS				
001Y - \$1 - Z0P	WESTPORT CT	- deres	1.4 CITY - S	T-ZIP	<u> </u>			
TILE	D SOURWARK MALKER	≥ DELETE	2 1 THILE 22 NAME		D DTIT HADE		Change	Addition
NAMi Carrier at the car	SCHWARZ, WALTER	SCHWARZ, WALTED SPITZWEG STRASSE 8			BILL WADE			
STHEE ADDRESS		97469 GOCHSHEIM GE		ADDRESS	12 HIGH RIDGE AVE. RIDGEFIELD, CT 06877			
CPY S ZP . THE	PD SOUTHSTIEM GE	DELETE		IT-ZIP	RIDGEFIELD, CI CCC//		Change	Addition
1,555	OLIVO, DIETER	<u> </u>	3 1 TITLE 3 2 NAME			ب		<u> </u>
STHEFT ADDRESS	BOSQUE DE ANTEQUERA 11	3 COLONIA BOSQUE	33 STREE	ADDRESS				
CHTY-ST ZIP	LA HERRADURA ME		3.4 CITY - 9	17 - ZIP				
HILF	VPT	□ DELETE	4. 1 TITLE				Change	Addition
NAMI	DITOMASO, GLNO		4.2 NAME					
STREE! ADDRESS	271 SHELTER ROCK ROAD		4.3 STREET	ADDRESS				
CHY-ST-ZIP	STAMFORD CT		4.4 CITY - S	T-ZIP				
TII.E		DELETE	5 1 TITLE				Change	Addition
NAMI			5 2 NAME	450555				
S REEL AU/OFESS			5 3 STREET					
CHY SEZIF		☐ DELETE	5.4 CITY - 5 6. 1 TITLE	1 - ZIP			Change	Addition
NAME			6.2 NAME				J. Larigo	
SCREEL ADDRESS			63 STREET	ADDRESS				
CHY ST-200			6.4 City-5					
14. Edo hereb			hed and doe	s not qualif	fy for the exemption stated in Section 119.0			
cert 'y thai oath, that appears ir	r the information indicated on this annual i I am an officer or director of the corporati i Block 12 or Block 13 if changed, all on a	report or supplemental annua ion or the receiver or trustee i an attack with an addres	a report is tra empowered ss.	ue and accu to execute	urate and that my signature shall have the sa this report as required by Chapter 607, Flori	ame legal effi ida Statutes:	ect as ; and the	п made under hat my name

Dieter Olivo

NAME OF SIGNING OFFICER OR DIRECTOR

1/23/96

(305)592-5043

Daytime Phone #