

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

**APPROVED
AND
FILED**

1997 OCT 20 AM 11: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 856565 (7)

1. Corporation Name
VANDERHANDS CORPORATION



Principal Place of Business % W. J. VAUGHN 2007-9 SOUTH MELBOURNE COURT MELBOURNE FL 32901	Mailing Address % W. J. VAUGHN 2007-9 SOUTH MELBOURNE COURT MELBOURNE FL 32901
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3. Date Incorporated or Qualified 05/26/1983	3a. Date of Last Report 04/30/1996
4. FEI Number 98-0063203	Applied For <input type="checkbox"/> 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 type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Calle Sorocaïma	2a. Mailing Address 26 100 S.E. 2nd Street, 31 fl.
Suite, Apt. #, etc. 22 Qta. Landa, El Rosal	Suite, Apt. #, etc. 27 Attn: Ana M de Alba
City & State 23 Caracas 1010A	City & State 28 Miami FL
Zip 24	Country 25 Venezuela
Zip 29 33131	Country 30

9. Name and Address of Current Registered Agent

**VAUGHN, W. J.
2007-9 S. MELBOURNE COURT
MELBOURNE FL 32901**

10. Name and Address of New Registered Agent

81 Name Alhambra Registered Agents, Inc.
82 Street Address (P.O. Box Number is Not Acceptable) 2 Alhambra Plaza, Suite 1202
83
84 City Coral Gables
85 Zip Code FL 33134

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: *Juan J. Karp*, **President** 10/15/97

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	COSTILLERO, CECILIO A.	
STREET ADDRESS	BANK OF AMERICA BLDG.	
CITY-ST-ZIP	PANAMA, R.P.	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GALINDO, GABRIEL A.	
STREET ADDRESS	BANK OF AMERICA BLDG.	
CITY-ST-ZIP	PANAMA, R.P.	
TITLE	T	<input type="checkbox"/> DELETE
NAME	DURLING, ROY CARLOS	
STREET ADDRESS	BANK OF AMERICA BLDG.	
CITY-ST-ZIP	PANAMA, R.P.	
TITLE	V	<input type="checkbox"/> DELETE
NAME	KAUFMAN, EPHRAIM	
STREET ADDRESS	CALLE SOROCAIMA	
CITY-ST-ZIP	CARACAS, VENEZUELA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	700002326617--7
2.4 CITY-ST-ZIP	-10/22/97--01043--015
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	****550.00 ****550.00
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 an attachment with an address.

SIGNATURE: *E. Karp* **Ephraim Kaufman 10/16/97**

CR2E034 (9/96)