

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

**APPROVED
AND
FILED**

95 APR 27 AM 9: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # F93000001997 (6)

1. Corporation Name

DILLINGHAM HOLDINGS, LIMITED COMPANY

Principal Place of Business

4 COLUMBUS CENTRE, WICKHAM'S CAY
ROAD TOWN, TORTOLA
VI

Mailing Address

801 BRICKELL AVE.
SUITE 1301
MIAMI FL 33131

300001466543
-04/27/95--01042--001
***10000.00 ***200.00
DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/27/1993

3a. Date of Last Report

03/23/1994

2. Principal Place of Business

21 Suite, Apt. #, etc

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

28 City & State

29 Zip

30 Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for a financial tax under S. 189.032,

Florida Statutes Yes No

9. Name and Address of Current Registered Agent

HUDSON, ROBERT F. JR.
701 BRICKELL AVE., #1600
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

John S. Sullivan

82 Street Address (P.O. Box Number is Not Acceptable)

801 Brickell Avenue

83 Suite 1301

84 City

Miami

FL

85 Zip Code
33131

11. Pursuant to the provisions of Sections 607.0902 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

John S. Sullivan

John S. Sullivan

April 18, 1995

Signature must be typed or printed below the signature.

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

A
ALFARO, HORACIO
AVDA. FEDERICO BOYD NO. 33
PANAMA 1

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

S
RAMIREZ, ALFREDO
AVDA. FEDERICO BOYD NO. 33
PANAMA 1

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

D
WORLDWIDE CORPORATE SERVICES, INC.
AVDA. FEDERICO BOYD NO. 33
PANAMA 1

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

P
Abdiel Mansfield

Change Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

S
Heriberto Ledezma

Change Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

Change Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

Change Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

Change Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

Change Addition

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 110.07(3)(A), 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:

Abdiel Mansfield
Abdiel Mansfield

(305) 381-8340

SIGNATURE MUST BE TYPED OR PRINTED BELOW THE SIGNING OFFICER OR DIRECTOR

DATE

PHONE NUMBER