

SORRY WE DID NOT RECEIVE THE 1ST NOTICE CARD

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Jul 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F93000004037 (8)**  
1. Corporation Name  
**BARUFO INVESTMENT INC.**



Principal Place of Business <b>2800 E. COMMERCIAL BLVD #213 FT. LAUDERDALE FL 33306</b>	Mailing Address <b>2800 E. COMMERCIAL BLVD #213 FT. LAUDERDALE FL 33306</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 12139 SW 132nd COURT</b>		2a. Mailing Address <b>26 PO BOX 162909</b>		3. Date Incorporated or Qualified <b>09/01/1993</b>	3a. Date of Last Report <b>03/27/1996</b>
Suite, Apt. #, etc. <b>22 MIAMI FL</b>		Suite, Apt. #, etc. <b>27 MIAMI FL</b>		4. FET Number <b>65-0485312</b>	Applied For <input type="checkbox"/> Not Applicable
City & State <b>23 MIAMI FL</b>		City & State <b>28 MIAMI FL</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
Zip <b>24 33186</b>	Country <b>25 USA</b>	Zip <b>29 33116-2909</b>	Country <b>30 USA</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**BARRAIN CHRISTIAN-HENRI  
2800 E. COMMERCIAL BLVD  
#213  
FT. LAUDERDALE FL 33306**

10. Name and Address of New Registered Agent

81 Name <b>BARRAIN CHRISTIAN-HENRI</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>12139 SW 132nd COURT</b>
83
84 City <b>MIAMI</b>
85 Zip Code <b>FL 33186</b>

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 CHRISTIAN BARRAIN Christian Barrain DATE 07-15-1997  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>DCP</b>	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>BARRAIN, CHRISTIAN H</b>		1.2 NAME	
STREET ADDRESS <b>72 WINDY GOLFWAY, DON MILLS</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>ONTARIO, CANADA M3C 3A7</b>		1.4 CITY-ST-ZIP	
TITLE <b>VP</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>BARRAIN WITHAM CHERYL LYNNE</b>		2.2 NAME	
STREET ADDRESS <b>11195 SW 154TH PLACE</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>MIAMI FL 33196</b>		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 an attachment with an address.

CR2E034 (4/97)

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PROFIT CORPORATION ANNUAL REPORT 1997



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

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Mailing Address: 2800 E. COMMERCIAL BLVD #213 FT. LAUDERDALE FL 33308

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23 MIAMI FL	24 33186	28 MIAMI FL	29 33116-2909
25 USA	29 USA	30 USA	

3. Date Incorporated or Qualified 09/01/1993	3a. Date of Last Report 03/27/1996
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SIGNATURE: CHRISTIAN BARRAIN (typed) / Christian Barrain (handwritten) DATE: 07-15-1997

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