


FILED
Jul 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000001462 (8)			
1. Corporation Name SCALA NORTH AMERICA, INC.			
Principal Place of Business % EDWARDS & ANGELL 250 ROYAL PALM WAY #300 PALM BCH FL 33480		Mailing Address % EDWARDS & ANGELL 250 ROYAL PALM WAY #300 PALM BCH FL 33480-4317	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent			
DE LABRY, COLETTE O % EDWARDS & ANGELL 250 ROYAL PALM WAY #300 PALM BCH FL 33480			81 Name 82 Street Address 83 84 City
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation, 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 title if applicable (NOTE: Registered Agent's signature required)			
12. OFFICERS AND DIRECTORS			
TITLE -DCP- <input type="checkbox"/> DELETE NAME MYREN, PER-OLOF STREET ADDRESS %EDWARDS & ANGELL, 250 ROYAL PALM WAY #300 CITY-ST-ZIP PALM BCH FL 33480		13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE -S- <input type="checkbox"/> DELETE NAME SOKOL, ALBERT L STREET ADDRESS %EDWARDS & ANGELL, 101 FEDERAL ST CITY-ST-ZIP BOSTON MA 02110		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE DVT <input checked="" type="checkbox"/> DELETE NAME MERCEDES, BEN STREET ADDRESS 10208 SOUTH CT CITY-ST-ZIP ORLANDO FL 32828		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

SIGNATURE-

5/22/97

617-439-4444

CB2F034 (9/96)