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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001462 (8)

SCALA NORTH AMERICA, INC.

FILED Jul 16 1997 8:00am Secretary of State

Principal Place of Business Mailing Address # EDWARDS & ANGELL 250 ROYAL PALM WAY #300 PALM BCH FL 33480 PALM BCH FL 33480 PALM BCH FL 33480-4317			900					
Triam politica					3.	Date Incorporated or Qualified 03/22/1996	3a. Date of Last i	Report
2. Principal P	lace of Business	2a. Mailing Address 26				FEI Number 65-065877	6	applied For lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5.	Certificate of Status Desired		Additional Required
City & Stat	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country Zip 25 29 30 9. Name and Address of Current Registered Agent		Country 30	Florida Statutes		Florida Statutes	has liability for intangible tal under s. 199.032, Yes No	
DE	LABRY, COLETTE O	Høgistered Agent	81	Name		Name and Address of New Re	gistered Agent	
% EDWARDS & ANGELL 250 ROYAL PALM WAY #300 PALM BCH FL 33480			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			83					
			84	City			FL 85 Zip	Code
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State in famíliar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a tions of, Section 607.0505, Flo	es, the aboviouthorized by	e-named y the corps.	corporation's	on submits this statement for the p board of directors. I hereby accep	ourpose of changing of the appointment as	its registered s registered
SIGNATURE								
				ent s graturo	e required who	n roinstaling) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	BS IN 12
TITLE			13.		DC	700770707077770	X Change	
NAME	MYREN, PER-OLOF		1.2 NAME	_		· ·		
STREET ADDRESS %EDWARDS & ANGELL, 250 ROYAL PALM WAY #300			1.3 \$18E£1	1.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BCH FL 33480	DELETE	1.4 CITY - S	T-ZIP	70		Change	Addition
TITLE	-		2.1 TITLE		DS		X Change	LT Worldon I
NAME CTREET ADDRESS	SOKOL, ALBERT L %EDWARDS & ANGELL, 101 FEDERAL ST		2.2 NAME 2.3 STHEET ADDRESS					1
STREET ADDRESS MEDWARDS & ANGELL, 101 FED			2.4 DITY-		Ì			
TITLE	DVT	X DELETE	3.1 TITLE	-	··		Change	Addition
NAME	MERCEDES, BEN		3.2 NAME.					
STREET ADDRESS	10208 ≥80TH CT		3 3 STREET	ADDRESS	}			
CITY-ST-ZIP	ORLANDO FL 32826		3.4. C(1Y-	ST - ZIP				
TITLE			4.1 TITLE	. –	DPVT		☐ Change	X Addition
NAME			4. 2 NAME		LYNC	H, KEVIN	4200	
STREET ADDRESS			4.3 STREET		1	Theodore Fremd Ave NY 10580	s., #300	
CITY-ST-ZIP		Dectie	4.4 C/TY-S	ST-ZIP	Rye,	NI 1U36U	Change	Addition
TITLE		☐ DELETE	5.1 TITLE		1 -	STEDT, ULF	[_] briange	E_1 WOOM OIL
NAME CORECT ADDRESS			5.2 NAME 5.3 STREFT	ADDD1 00	1	alsvagen 50, Box	104	
STREET ADDRESS	1		1		1	a S-131 07, Sweden		}
CITY-SI-ZIP TITLE		DELETE	54 CITY-5) - Z(t'	Mack	.a 5-151 0/3 bwedel	Change	Addition
NAME			6.2 NAME		}			
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CHY - S					
	by certify that the information supplied	with this filing does not qualif			stated in Se	ection 119.07(3)(i), Florida Statute	s. I further certify tha	I the

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicmental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 or an attachment with an address.

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Notard & alalal

5/22/97

617-439-4444