

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 # F96000004989 (7)

1. Corporation Name

ETERNAL VENTURES LTD. INC.

Principal Place of Business

8682 NW HWY 225A
OCALA FL 34482

Mailing Address

8682 NW HWY 225A
OCALA FL 34482-1275

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

g. Name and Address of Current Registered Agent

HUGHES, SANDY
8682 NW HWY 225A
OCALA FL 34482

3. Date Incorporated or Qualified

09/27/1996

3a. Date of Last Report

4. FEI Number

59-340-5910

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 intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

600002232216-2

07/08/97-01003-003

****173.75 ****173.75

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and date, if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

SANDY HUGHES

APRIL 20, 1997

12. OFFICERS AND DIRECTORS

TITLE C
NAME MO, MORTEN
STREET ADDRESS LORENTZEN AND STEMOCO AS, LILLEAKERVEIEN 4
CITY-ST-ZIP N-0216 OSLO, NORWAY

TITLE D
NAME KLEVEN, MORTEN
STREET ADDRESS LORENTZEN AND STEMOCO AS, LILLEAKERVEIEN 4
CITY-ST-ZIP N-0216 OSLO, NORWAY

TITLE D
NAME ISMAR, JENS
STREET ADDRESS LORENTZEN AND STEMOCO AS, LILLEAKERVEIEN 4
CITY-ST-ZIP N-0216 OSLO, NORWAY

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

1.1 TITLE C
1.2 NAME EINAR C NAGELL-ERICHSEN
1.3 STREET ADDRESS HAFRSFJORDG 8
1.4 CITY-ST-ZIP 0273 OSLO, NORWAY

2.1 TITLE D
2.2 NAME MORTEN MO
2.3 STREET ADDRESS LILLEAKERVEIEN 4
2.4 CITY-ST-ZIP 0216 OSLO, NORWAY

3.1 TITLE D
3.2 NAME NINA BERGMAN
3.3 STREET ADDRESS LILLEAKERV 4
3.4 CITY-ST-ZIP 0216 OSLO, NORWAY

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 supplement to 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; that the person or persons 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.

FILED

97 JUL -1 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (9/96)