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Mar 13 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 # F96000006806 (1)

1. Corporation Name
KISSALLE LTD., INC.

Principal Place of Business

1858 RINGLING BLVD
SARASOTA FL 34236

Mailing Address

1858 RINGLING BLVD
SARASOTA FL 34236-5917



3. Date Incorporated or Qualified

12/27/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLENDINING, RENE M
1858 RINGLING BLVD
SARASOTA FL 34236

81 Name

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

83

84 City

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME VALDIR MANAGERS LIMITED
STREET ADDRESS 50 TOWN RANGE
CITY-ST-ZIP GIBRAUTAR

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP Gibraltar

Change Addition

TITLE CD
NAME HASSAN, JAMES D
STREET ADDRESS 50 TOWN RANGE
CITY-ST-ZIP GIBRAUTAR

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP Gibraltar

Change Addition

TITLE S
NAME FINSBURY SECRETARIES LIMITED
STREET ADDRESS 50 TOWN RANGE
CITY-ST-ZIP GIBRAUTAR

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP Gibraltar

Change Addition

TITLE S
NAME PERERA, MAURICE A
STREET ADDRESS 50 TOWN RANGE
CITY-ST-ZIP GIBRAUTAR

DELETE

4.1 TITLE
4.2 NAME Perera, Maurice A.
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Gibraltar

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

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

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 00000000

CR2E034 (9/96)