

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

FILED

May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G49945** (0)

1. Corporation Name
CARGIL INTERNATIONAL CORP.

Principal Place of Business 6812 NW 77TH COURT MIAMI FL 33166	Mailing Address 6812 NW 77TH COURT MIAMI FL 33166-2713
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/27/1983	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2379993		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	28 Zip	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	29	30		

9. Name and Address of Current Registered Agent LEYVA, GIRALDO 6812 NW 77TH COURT MIAMI FL 33166		10. Name and Address of New Registered Agent	
		81 Name Hector J. Mir	
		82 Street Address (P.O. Box Number is Not Acceptable) 2655 Le Jeune Road	
		83 Suite Suite 1107	
		84 City Coral Gables,	85 Zip Code FL 33134

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 *Hector J. Mir* **Hector J. Mir** **4/30/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ORTEGA, CARLOS		1.2 NAME LEYVA, GIRALDO SR.	
STREET ADDRESS 6812 NW 77TH COURT		1.3 STREET ADDRESS 6812 N.W. 77TH COURT	
CITY-ST-ZIP MIAMI FL 33166		1.4 CITY-ST-ZIP MIAMI, FLORIDA 33166	
TITLE D	<input checked="" type="checkbox"/> DELETE	2.1 TITLE V/S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME LEYVA, GIRALDO		2.2 NAME LEYVA, GIRALDO JR.	
STREET ADDRESS 6812 NW 77TH COURT		2.3 STREET ADDRESS 6812 N.W. 77TH COURT	
CITY-ST-ZIP MIAMI FL 33166		2.4 CITY-ST-ZIP MIAMI, FLORIDA 33166	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME MARTINEZ, JUAN	
STREET ADDRESS		3.3 STREET ADDRESS 6812 N.W. 77TH COURT	
CITY-ST-ZIP		3.4 CITY-ST-ZIP MIAMI, FLORIDA 33166	
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, unchanged, or on an attachment with an address.

SIGNATURE: *Giraldo Leyva, Jr.* **Giraldo Leyva, Jr.** **4/30/97** (305) 477-3322
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)