


FILED

Mar 21 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 # H95392		(7)	
1. Corporation Name GREENBAY COMPANY, INC.			
Principal Place of Business		Mailing Address	
3111 STIRLING RD SUITE B132 FT. LAUDERDALE FL 33312		3111 STIRLING RD SUITE B132 FT. LAUDERDALE FL 33312-6566	
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			
GOLAN, AMNON 3111 STIRLING ROAD SUITE B132 FT. LAUDERDALE FL 33312			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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporate agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ (NOTE: Registered Agent signature required)			
12. OFFICERS AND DIRECTORS			
1. TITLE	PSD	<input type="checkbox"/> DELETE	13.
2. NAME	GOLAN, AMNON		
3. STREET ADDRESS	3620 N 53RD AVE.		
4. CITY - ST - ZIP	HOLLYWOOD FL		
5. TITLE	VTD	<input type="checkbox"/> DELETE	1.1 TITLE
6. NAME	SHAKED, SHMUEL		1.2 NAME
7. STREET ADDRESS	413 ALLSPICE ST.		1.3 STREET ADDRESS
8. CITY - ST - ZIP	KISSIMMEE FL		1.4 CITY - ST - ZIP
9. TITLE		<input type="checkbox"/> DELETE	2.1 TITLE
10. NAME			2.2 NAME
11. STREET ADDRESS			2.3 STREET ADDRESS
12. CITY - ST - ZIP			2.4 CITY - ST - ZIP
13. TITLE		<input type="checkbox"/> DELETE	3.1 TITLE
14. NAME			3.2 NAME
15. STREET ADDRESS			3.3 STREET ADDRESS
16. CITY - ST - ZIP			3.4 CITY - ST - ZIP
17. TITLE		<input type="checkbox"/> DELETE	4.1 TITLE
18. NAME			4.2 NAME
19. STREET ADDRESS			4.3 STREET ADDRESS
20. CITY - ST - ZIP			4.4 CITY - ST - ZIP
21. TITLE		<input type="checkbox"/> DELETE	5.1 TITLE
22. NAME			5.2 NAME
23. STREET ADDRESS			5.3 STREET ADDRESS
24. CITY - ST - ZIP			5.4 CITY - ST - ZIP
25. TITLE		<input type="checkbox"/> DELETE	6.1 TITLE
26. NAME			6.2 NAME
27. STREET ADDRESS			6.3 STREET ADDRESS
28. 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 information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: A. GOLAN			



CR2E034 (9/96)