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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J82270 (6)
1. Corporation Name
MIRAFAYA, INC.



Principal Place of Business

Mailing Address

% ANKE BACKER
2269 LEE ROAD
WINTER PARK FL 32789
US

% ANKE BACKER
2269 LEE ROAD
WINTER PARK FL 32789
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1950 Summit Park Drive	26	1950 Summit Park Drive	07/09/1987	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	Suite 300	27	Suite 300	59-2846768	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Orlando, FL	28	Orlando, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Zip 32810	29	Zip 32810	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
25	Country USA	30	Country USA		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BACKER, ANKE
2269 LEE ROAD
WINTER PARK FL 32789

81	Name	BACKER, ANKE	
82	Street Address (P.O. Box Number is Not Acceptable)	1950 Summit Park Drive	
83		Suite 300	
84	City	Orlando,	FL
85	Zip Code	32810	

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	D	1.1 TITLE	
NAME	VON MEISS, FLORIAN	1.2 NAME	
STREET ADDRESS	USTERISTRASSE 14	1.3 STREET ADDRESS	
CITY-ST-ZIP	CH-801 ZURICH, SWIT	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	D
NAME	MEYER, PHILIP	2.2 NAME	BLUM CLAUDE
STREET ADDRESS	USTERISTRASSE 14	2.3 STREET ADDRESS	USTERISTRASSE 14
CITY-ST-ZIP	CH-8020 ZURICH, SWIT	2.4 CITY-ST-ZIP	CH-8021 ZURICH, SWITZERLAND
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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

Florian von Meiss April 17, 1998 +41-1-2119888

CR2E034 (10/97)