
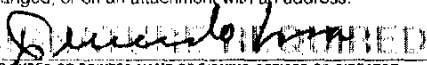


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 09 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 # L36411 (1)			
1. Corporation Name MERCAL CORP., (U.S.A.)			
Principal Place of Business % FERNANDO LORA 8300 W. FLAGLER MIAMI FL 33144		Mailing Address % FERNANDO LORA 8300 W. FLAGLER MIAMI FL 33144-2096	
2. Principal Place of Business		3a. Date of Last Report 07/16/1996	
21. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/12/1989	
22. City & State		4. FEI Number 65-0180430	
23. Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25. Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
26. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
27. Country		9. Name and Address of Current Registered Agent	
28. Country		10. Name and Address of New Registered Agent	
29. Country		81. Name	
30. Country		82. Street Address (P.O. Box Number is Not Acceptable)	
31. Country		83.	
32. Country		84. City	
33. Country		85. Zip Code	
34. Country		86. Zip Code	
35. Country		87. Zip Code	
36. Country		88. Zip Code	
37. Country		89. Zip Code	
38. Country		90. Zip Code	
39. Country		91. Zip Code	
40. Country		92. Zip Code	
41. Country		93. Zip Code	
42. Country		94. Zip Code	
43. Country		95. Zip Code	
44. Country		96. Zip Code	
45. Country		97. Zip Code	
46. Country		98. Zip Code	
47. Country		99. Zip Code	
48. Country		100. 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			
(NOTE: Registered Agent signature required when reinstating)			
DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
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 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 #			



CR2E034 (9/96)