FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # L77616 (5)

1. Corporation Name

PELICAN PROPERTIES, INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
3191 CORAL WAY #115 MIAMI FL 33145	3191 CORAL WAY #115 MIAMI FL 33145

3. Date Incorporated or Qualified: 06/01/1990
3a. Date of Last Report: 06/09/1995

2. Principal Place of Business	2a. Mailing Address
21 3191 CORAL WAY	26 3191 CORAL WAY
Suite, Apt #, etc. 22 SUITE 115-102	Suite, Apt. #, etc. 27 SUITE 115-102
City & State 23 MIAMI, FL	City & State 28 MIAMI, FL
Zip 24 33145 Country 25	Zip 29 33145 Country 30

4. FEI Number: APPLIED FOR 65-061-6879 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GOMEZ, RENE
% OFFICE ALTERNATIVE
3191 CORAL WAY #115
MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name: TIMOTHY M. BENJAMIN
82 Street Address (P.O. Box Number is Not Acceptable): 3191 CORAL WAY, SUITE 115-102
83
84 City: MIAMI FL 85 Zip Code: 33145

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] TIMOTHY M. BENJAMIN DATE 6/19/96

12. OFFICERS AND DIRECTORS

TITLE	PVSD	☒ DELETE
NAME	GOMEZ, RENE	
STREET ADDRESS	3191 CORAL WAY #115	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	C. JOHN KNORR	
1.3 STREET ADDRESS	3191 CORAL WAY SUITE 115-102	
1.4 CITY-ST-ZIP	MIAMI, FL 33145	
2.1 TITLE	T/S/D	☐ Change ☒ Addition
2.2 NAME	ROD MARTIN	
2.3 STREET ADDRESS	3191 CORAL WAY SUITE 115-102	
2.4 CITY-ST-ZIP	MIAMI, FL 33145	
3.1 TITLE	P	☐ Change ☒ Addition
3.2 NAME	JANE BERGMAN	
3.3 STREET ADDRESS	3191 CORAL WAY SUITE 115-102	
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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] 6/19/96 1-800-852-0348

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)