

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 # M12273 (2)

1. Corporation Name

CARISAM INTERNATIONAL CORP.

Principal Place of Business

2315 N.W. 107 AVE.
MIAMI FL 33172

Mailing Address

2315 N.W. 107 AVE.
MIAMI FL 33172



3. Date Incorporated or Qualified
03/07/1985

3a. Date of Last Report
04/24/1995

2. Principal Place of Business

21 6691 Baymeadow Drive

2a. Mailing Address

26 6691 Baymeadow Drive

4. FEI Number

59-2502723

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$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

X No

City & State

23 Glen Burnie, MD

Zip

24 21060

Country

City & State

28 Glen Burnie, MD

Zip

29 21060

Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature of principal officer or registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	□ DELETE
NAME	HOWIE, JEROME A.	
STREET ADDRESS	5070 NW 93RD DORAL PL	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VD	□ DELETE
NAME	ALARD, ENRIQUE S.	
STREET ADDRESS	12862 S.W. 115TH TERR.	
CITY-STATE-ZIP	MIAMI FL	
TITLE	VD	□ DELETE
NAME	BERSTEIN, DAVID	
STREET ADDRESS	2403 STILL FOREST ROAD	
CITY-STATE-ZIP	BALTO MD 21208	
TITLE	VD	X DELETE
NAME	COURI, JOHN	
STREET ADDRESS	44 MULBERRY ST.	
CITY-STATE-ZIP	RIDGEFIELD CT 06877	
TITLE	VSTD	□ DELETE
NAME	EGAN, GERALD	
STREET ADDRESS	6 FENCE CREEK DR.	
CITY-STATE-ZIP	MADISON CT 06443	
TITLE		□ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	□ Change □ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	□ Change □ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	□ Change □ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	Vice President, Director
4.2 NAME	Alfred Carfora
4.3 STREET ADDRESS	23 Ridgewood Drive
4.4 CITY-STATE-ZIP	West Redding, CT 06896
5.1 TITLE	□ Change □ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	Vice President, Asst. Secretary
6.2 NAME	Robert T. Weitz
6.3 STREET ADDRESS	6 West Spring Way
6.4 CITY-STATE-ZIP	Lutherville, MD 21093

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 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald F. Egan 2/15/96 203-431-6057

CR2E034 (12/95)