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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # M44705

(5)

OLDUVAI CORPORATION

FILED
Apr 21 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address						I DDA BOK DIK DI BI BIBLI TODI (BODI BIK BIŞK BIŞK BIBLI BIBLI FİŞK BIŞK BIŞK BIŞK I KƏDI		
9200 & DADEL		9200 S DADEL						
GUITE \$25		SUITE 525						
MIAMI FL 3315 US	6	Miami FL 3315 US	6-2713			3. Date Incorporated or Qualified 01/13/1987	3a. Date of Last Report 04/19/1996	
2. Principal P	Place of Business	2a. Mailing Ac	Idross			4. FEI Number 59-2757652	Applied For	
Suite, Apt.	#, etc.	Suite, Apt.	#. etc.			09-2101002	Not Applicable \$8.75 Additional	
22		27				5. Certificate of Status Desired	Fee Required	
City & State	е	City & State				6. Election Campaign Financing	\$5.00 May Be	
Zip	Country Zip			Country	,	Trust Fund Contribution	Added to Fees	
24	25	29	30	າ ້		S. This corporation has liability for it Florida Statutes	Nangible tax under s. 199,032, Yes No	
	9. Name and Address of Curren			, <u> </u>		10. Name and Address of New Re		
CAHLIN, RICHARD A				81	Name			
	90 WEST DIXIE HIGHWAY		82 Street Ad			ddress (P.O. Box Number is Not Acceptab	e)	
	FLOOR		Į.			,		
NORTH MIAMI BEACH FL 33180				83				
·				84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607,050.	2 and 607.1508, Flo	orida Statutes, t	the above	e-named c	corporation submits this statement for the proration's board of directors. I hereby accep		
agent. I a	m familiar with, and accept the obliga	ations of, Section 60	07.0505, Florida	a Statule:	r the corpo s.	uration's board of directors, I hereby accep	the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered age:	nt and title if applicable	(NOTL Re	gistered Agr	nil signatur. r	oguired when reinstaling)	DATE	
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PTS		DELETE	1.1 TITLE			Change Addition	
NAME	LABOURT, NICOLAS	P EAE		1.2 NAME				
STREET ADDRESS	9200 S DADELAND BLVD., STE MIAMI FL	E. 323		1.3 STREET	Į.			
CITY-ST-ZIP TITLE	V		DELETE	1.4 COY+S 2.1 TIBLE	1-ZIP		Change Addition	
NAME	NICOLAS, LABOURT		O.C. IE	2.2 NAME			CT Quantite CT Modition	
STREET ADDRESS	9200 S DADELAND BLVD., STE	E. 52 5	AE .		ADDRESS			
CITY-ST-ZIP	MIAMI FL			2 4 CHY- 9	J			
TITLE			DELETE	31 1111.1			Change Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP			DELETE	3.4. CITY - 9	51 · ZIP		Change	
NAME		LJ	DELCIE	4.1 TITLE 4. 2 NAME			Change Addition	
STREET ADDRESS			l	4.2 NAIVIL	ADDRESS			
CITY-ST-ZIP	•		ľ	4.4 CITY-S	1			
TITLE			DELETE	5.1 TITEF			Change Addition	
NAME				5.2 NAME				
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY-ST-ZIP				54 CITY-S	1 - 7IP			
TITLE		L		6.1 TITLE			Charige Addition	
NAME	A STATE OF THE STA		•	6.2 NAME				
STREET ADORESS	•			6.3 \$1REE1				
City-St-ZiP	us oodify that the information a walled	Committee and the committee of the commi		6.4 CITY - ST	I-ZIP	140 07/00/5 10 24- 0/4		

o nereby 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 eath; 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 alternative and dress.