	COR ANNU	ILE NOW: FILI PROFIT PORATION JAL REPORT 1997	NG FEE AFTE	FLORIDA DEPA <b>Sandra I</b> Secreta	\$550.00 RTMENT OF STATE B. Mortham ary of State CORPORATIONS	F Apr 22 1 Secreta		
	OCUI Corporation INTELTF	······		(9) IENT CORP.				
1912 N.W. 94 AVE. MIAMI FL 33172 MIAMI FL 33172				2 N.W. DI AVE.				
<b></b>						3. Date Incorporated or Qualified 05/06/1987	3a. Date of Last R 05/17/1996	
2. 21	Principal P	lace of Business	26	Mailing Address		4. FEI Number 59-2801013	N	pplied For ot Applicable
22	Suite, Apt	a, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 7 7 7 7 7 7	Additional equired
[	City & Stat	() ()		City & State		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
23	Zip	Country		Zip	Country	8. This corporation has liability for	ntangible tax under s	
24		25 9. Name and Addre	29 29 as of Current Regist	ered Agent	30	Florida Statutes	Yes No	
}	NIA Pursuant office or r agent. La	8 SW 131 PLACE MI FL 33165 to the provisions of Sect registered agent, or both m familiar with, and acc	ions 607 0502 and 60 , in the State of Florid apt the obligations of	17. 1508, Florida Stati a Such change was Section 607.0505, F	83 84 City	ress (P.O. Box Number is Not Acceptat poration submits this statement for the p tion's board of directors. I hereby accept	FL 85 Zip	Code Its registered s registered
S	IGNATURI	Signature: typed or preted name			)TE: Registered Agent signature requi		DATE	
1: TP	<b>2.</b> ILF	0 D	FFICERS AND DIREC	TORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Chan(Ite	RS IN 12
Sì	AME IRLET ADDRESS	TRAVIESO, ENRIQU 2838 SW 131 PLAC MIAMI FL			1.2 NAME 1.3 STREET ADDRESS			CB2 CB2 CB2 CB2 CB2 CB2 CB2 CB2 CB2 CB2
Tu N/	<u>ty - St - Zie</u> Tle Ame Greet address	D Travieso, Enriqi 1133 NW. 133 CT.	JE	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Cl Chançe	Addition 5
ווד אי 51	ty-st-zif TLE Ame IREE: Address Ty-st-zif	MIAMI FL 33182 D TRAVIESO, ELENA 1133 N.W. 133 CT MIAMI FL 33182		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		Change	Addition
711 16/ 51	TE-ST-ZIP NE IREE ADDRESS TE-ST-ZP	D TRAVIESO, ELENA 1133 N.W. 133 CT. MIAMI FL 33182		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	- <u> </u>	Change	Addition
to N/ St	TLE AME THEET ACURESS TY - ST- ZIF			DELETE	5 1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZiP		Change	Addition
311 N# S3	TLE AME TREET ADDRESS TV-SE-722	   		DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-SY-ZIP		Change	Addition
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 oport of 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 comprision of 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 the hinged or often attachment with an address. SIGNATURE:								