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

SIGNATURE:

BIGNATURE AND TYPED OR PRINCE

**FILED** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Jun 16 1997 8:00 am ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 Secretary of State DOCUMENT # GSTAAD INC. Principal Place of Business Mailing Address SERGIO E. LEMME 7088 N.W.50TH STREET (SAME) 3a. Date of Last Report 3. Date Incorporated or Qualified MIAMI, FLORIDA 33166 06/16/96 09/17/87 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0004902 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees **Trust Fund Contribution** 28 23 Country Ζιρ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 25 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 SERGIO E. LEMME 7088 N.W. 50TH STREET 83 MIAMI, FLORIDA 85 Zip Code **84** City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. CR2E034 (9/96) TITLE DELETE PRESIDENT 1.2 NAME NAME SERGIO E. LEMME STREET ADDRESS 1.3 STREET ADDRESS 7088 N.W. 50TH STREET 1192 N.W. 182 WAY MIAMI, FLORIDA 1.4 CITY - \$T - ZIP 33166 CITY-ST-ZIP PEMBROKE, FLORIDA... Addition 2.1 Till E TITLE SECRETARY 22 NAME NAME MARIA ANDREA LEMME 2 3 STREET ADDRESS STREET ADDRESS 7088 N.W. 50TH STREET 1192 N.W. 182 WAY CITY-ST-ZIP 2. 4 CITY - ST - ZIP PEMBROKE, FLORIDA MIAMI, FLORIDA 33166 TITLE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 C(1Y-ST-7)P CITY-ST-ZIP DELFTE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET AODRESS CITY-ST-7IP 4.4 CITY - ST - 7/P 500002214245 -06/17/97--01019--034 DELETE Addition 5.1 TITLE NAME **5.2 NAME** 5.3 STREET ADDRESS STREET ADDRESS \*\*\*165.00 CITY-ST-ZIP 5.4 CITY - \$1- ZIP DELETE Change Addition 61 14116 TITLE 6.2 NAME NAME cs 63 STREET ADDRESS STREET ADDRESS 6.4 CHY-SI-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 reports 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 trusted in properties 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.

06/12/97

(305)592-0222