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Mar 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000003467 (5)

1. Corporation Name

FERIA INTERNACIONAL DE ANDALUCIA, INC.



Principal Place of Business

Mailing Address

240 CRANDON BLVD. STE 204
KEY BISCAYNE FL 33149

240 CRANDON BLVD. STE 204
KEY BISCAYNE FL 33149-1543

3. Date Incorporated or Qualified
06/27/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

65-0696484

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

10. Name and Address of New Registered Agent

GLOBAL MANAGEMENT SERVICES, INC.
240 CRANDON BLVD. STE 204
KEY BISCAYNE FL 33149

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT
NAME CARLOS J. SANTA MARIA
STREET ADDRESS 199 OCEAN LAKE DRIVE, APT. 309
CITY-ST-ZIP KEY BISCAYNE, FLORIDA 33149

1.1 TITLE DIRECTOR
1.2 NAME MAYRA C. SANTAMARIA
1.3 STREET ADDRESS 199 OCEAN LAKE DR. APT 309
1.4 CITY-ST-ZIP KEY BISCAYNE FL. 33149

TITLE VICE-PRESIDENT
NAME FEDERICO JARQUE
STREET ADDRESS 51 ISLAND DRIVE
CITY-ST-ZIP KEY BISCAYNE, FLORIDA 33149

2.1 TITLE NEYSA CABRERA
2.2 NAME NEYSA CABRERA
2.3 STREET ADDRESS 77 CRANDON BLVD. SUITE 20
2.4 CITY-ST-ZIP KEY BISCAYNE FL. 33149

TITLE SECRETARY
NAME ARNOLDO MARIU
STREET ADDRESS 17842 S.W. 11 STREET
CITY-ST-ZIP PEMBROKE PINES, FLORIDA 33029

3.1 TITLE OYALDA CABRERA DIRECTOR
3.2 NAME OYALDA CABRERA
3.3 STREET ADDRESS 77 CRANDON BLVD. SUITE 20
3.4 CITY-ST-ZIP KEY BISCAYNE FL. 33149

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

CR2E037 (9/96)