

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000003636 (7)

1. Corporation Name

NARIAM SYSTEMS INCORPORATED



Principal Place of Business

10922 S.W. 153RD AVENUE
MIAMI FL 33196

Mailing Address

10922 S.W. 153RD AVENUE
MIAMI FL 33196

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

TALENO, MIRIAM P
10922 S.W. 153RD AVENUE
MIAMI FL 33196

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

11/05/1992

3a. Date of Last Report

04/21/1995

4. FEI Number

65-0371815

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. 193.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D	NAME	GONZALEZ, NARCISO	STREET ADDRESS	10922 SW 153RD AVE	CITY-STATE-ZIP	MIAMI FL 33196	DELETE
TITLE	D	NAME	TALENO, MIRIAM P	STREET ADDRESS	10922 SW 153RD AVE	CITY-STATE-ZIP	MIAMI FL 33196	DELETE
TITLE		NAME		STREET ADDRESS		CITY-STATE-ZIP		DELETE
TITLE		NAME		STREET ADDRESS		CITY-STATE-ZIP		DELETE
TITLE		NAME		STREET ADDRESS		CITY-STATE-ZIP		DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	12. NAME	13. STREET ADDRESS	14. CITY-STATE-ZIP	15. TITLE	2. NAME	23. STREET ADDRESS	24. CITY-STATE-ZIP	3. TITLE	33. NAME	33. STREET ADDRESS	34. CITY-STATE-ZIP	4. TITLE	42. NAME	43. STREET ADDRESS	44. CITY-STATE-ZIP	5. TITLE	52. NAME	53. STREET ADDRESS	54. CITY-STATE-ZIP	6. TITLE	62. NAME	63. STREET ADDRESS	64. CITY-STATE-ZIP

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 officer or director designated to execute this report as required by Chapter 697, Florida Statutes, and that my name appears in Block 12 or Block 13. Change or, or on an attachment to this address.

SIGNATURE: *Miriam P. Taleno*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96, (353) 387-3772
Date and Phone Number

CR2E034 (12/95)