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Apr 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000001448 (8)

1. Corporation Name  
LION OVERSEAS CORPORATION



Principal Place of Business Mailing Address  
~~6701 SW 116 COURT~~ 12273 S.W. 129 ~~6701 SW 116 COURT~~ 12273 S.W. 129  
UNIT 408 COURT UNIT 408 COURT  
MIAMI FL 33170-1747 MIAMI FL 33173-1747  
MIAMI FL. 33186 MIAMI FL. 33186

3. Date Incorporated or Qualified 01/08/1993  
3a. Date of Last Report 04/02/1996

2. Principal Place of Business 2a. Mailing Address  
21 12273 S.W. 129 COURT 26 12273 S.W. 129 COURT  
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number 65-0386856  
Applied For Not Applicable

22 City & State 27 City & State  
23 MIAMI FL. 28 MIAMI FL.

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

24 33186 25 DADE 29 33186 30 DADE

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  
GALLARDO-LEON, SERGIO  
7034 S.W. 114TH PLACE  
UNIT C  
MIAMI FL 33173

10. Name and Address of New Registered Agent

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 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 fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P GALLARDO-LEON, SERGIO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6701 SW 116 CT UNIT 408	1.2 NAME	
STREET ADDRESS	MIAMI FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VT RIOS, PEDRO	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10965 SW 70 TERR	2.2 NAME	
STREET ADDRESS	MIAMI FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 a 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 attachment with an address.

SIGNATURE: *Pedro Rios*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: MARCH 26 1997 Daytime Phone #

CR2E034 (9/96)