

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

2

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P93000002122 (8)**

1. Corporation Name

MABROUK TROPICAL, INC.



Principal Place of Business

Mailing Address

520 BRICKELL KEY DR.
SUITE#305
MIAMI FL 33131
US

520 BRICKELL KEY DR.
SUITE#305
MIAMI FL 33131
US

2. Principal Place of Business

2a. Mailing Address

21 520 Brickell Key Drive

2a. 701 Brickell Avenue

22 Suite, Apt. #, etc
#513

27 Suite, Apt. #, etc
Suite 2150

23 MIAMI FL

28 MIAMI FL

24 33131 25 USA

29 33131 30 USA

3. Date Incorporated or Qualified

01/11/1993

3a. Date of Last Report

04/21/1995

4. FEI Number

65-0379855

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

SLOSBERGAS, NELSON
501 N BRICKELL KEY DR
520 BRICKELL KEY DRIVE, SUITE#305
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Jose Maria Carneiro da Cunha

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

2000 S. Bayshore DR. #74

83

84 MIAMI

85 FL 33133

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of signing officer or director

Jose Maria Carneiro da Cunha

(If Different from Agent's signature on registered certificate)

Date

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ALLEN, ROBERT N JR	
STREET ADDRESS	520	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DIEGA, FERNANDO LUIZ DA G. LEO	
1.3 STREET ADDRESS	701 BRICKELL AVENUE SUITE #2150	
1.4 CITY-ST-ZIP	MIAMI - FL 33131	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fernando da G. Leo

CR2E034 (12/95)