

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

FILED

Feb 13 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 # P93000024059 (6)

1. Corporation Name
AM-COL INTERNATIONAL, INC.



Principal Place of Business 123 SE 3RD AVE SUITE 204 MIAMI FL 33131	Mailing Address 123 SE 3RD AVE SUITE 204 MIAMI FL 33131-2003
--	---

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 03/30/1993	3a. Date of Last Report 10/21/1996	4. FEI Number 65-0399761	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
--	---	---	---------------------------------------	-----------------------------	-------------------------------	---	---	---

9. Name and Address of Current Registered Agent PALACIO, GEORGINA C 123 S.E. 3RD AVENUE #204 MIAMI FL 33131	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 607.0508, 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 *Georgina C. Palacio* DATE 2/8/97

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP DPS PALACIO, GEORGINA C 123 SE 3RD AVE STE 204 MIAMI FL 33131	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP DVPT PALACIO, CLAUDIO A. 123 SE 3RD AVE STE 204 MIAMI FL 33131	2.1. TITLE 2.2. NAME 2.3. STREET ADDRESS 2.4. CITY - ST - ZIP DUPT PALACIO, CLAUDIO A. 123 SE 3RD AVE #204 MIAMI, FL 33131 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	3.1. TITLE 3.2. NAME 3.3. STREET ADDRESS 3.4. CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	4.1. TITLE 4.2. NAME 4.3. STREET ADDRESS 4.4. CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	5.1. TITLE 5.2. NAME 5.3. STREET ADDRESS 5.4. CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	6.1. TITLE 6.2. NAME 6.3. STREET ADDRESS 6.4. CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Georgina C. Palacio* DATE 2/8/97

CR2E034 (9/96)