FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

APPROVED AND FILED

95 MAY -1 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000037450 (2)**

1. Corporate Name
OLIVER INTERNATIONAL INC.

Principal Place of Business
9999 NW 89 AVE.
#6 BAY
MEDLEY FL 33178
US

Mailing Address
9999 NW 89 AVE.
BAY #6
MEDLEY FL 33178
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/24/1993
3a. Date of Last Report: 06/17/1994

2. Principal Place of Business
21 21320 NE 12 CT
22 N. M. B
23 FL
24 33179 25 BROWARD

2a. Mailing Address
26 6950 CYPRESS RD
27 # 208-15
28 Plantation FL
29 33317 30 BROWARD

4. FEI Number: 59-2423145 — Applied For / Not Applicable

5. Certificate of Status Desired: [ ] $8.75 Additional Fee Required

6. Electronic Campaign Disclosure Filed Prior Contribution: [ ] $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: [ ] Yes [X] No

9. Name and Address of Current Registered Agent
AO, DONG
9999 NW 89 AVE.
BAY #6
MEDLEY FL 33178

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City: FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1908, 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. The street address of its registered office and the name of its registered agent are identical to those as last reported with the Department of State, Division of Corporations, Tallahassee, Florida.

SIGNATURE

12. OFFICERS AND DIRECTORS
PD
NAM: AO, DONG
9999 NW 89 AVE., BAY #6
MEDLEY FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
PD
AO DONG
21320 NE 12 CT. N.M.B
FL 33179.
[X] Change [ ] Add

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attached schedule, as an officer or director.

SIGNATURE: DONG AO 04/27/95 305-791-2061
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR

0194912 CP