

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
 Aug 27 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000037905 (5)
 1. Corporation Name
PRIZMA INTERNATIONAL CORPORATION

Principal Place of Business 1616 NW 84TH AVE MIAMI FL 33126	Mailing Address 1616 NW 84TH AVE MIAMI FL 33126
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2. Principal Place of Business 21 1616 NW 84 AVE Suite, Apt. #, etc.	2a. Mailing Address 26 Same Suite, Apt. #, etc.
22 City & State 23 Miami FL	27 City & State
24 Zip 33126	25 Country U.S.A.
29 Zip	30 Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/26/1993	3a. Date of Last Report 03/25/1996
4. FEI Number 65-0412763	Applied Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Addit. Fee Require.
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Added to Fee
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
~~FILINGS INC
 3738 NW 16 STREET
 FT LAUDERDALE FL 33311~~

10. Name and Address of New Registered Agent

81 Name STEVEN A. YOUNG, CPA
82 Street Address (P.O. Box Number is Not Acceptable) 10729 S.W. 104TH STREET
83
84 City MIAMI
85 State FL
86 Zip Code 33126

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]* **STEVEN A. YOUNG, ACCOUNTANT** DATE **8/22/97**

Signature typed or printed, name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	D	<input type="checkbox"/>
NAME	CHEN, YAH W	
STREET ADDRESS	1616 NW 84 AVE	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	D	<input type="checkbox"/>
NAME	LOU, EN H	
STREET ADDRESS	1616 NW 84 AVE	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		<input type="checkbox"/> Change <input type="checkbox"/>
1.1 TITLE		<input type="checkbox"/>
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/>
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/>
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/>
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/>
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/>
6.2 NAME		
6.3 STREET ADDRESS	600002280226	
6.4 CITY-ST-ZIP	-08/28/97--01108--016	
	***550.00	

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 the authority of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is the name of the person who is the registered agent of the corporation with an address...