


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

FILED

Aug 11 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 # P93000043386
1. Corporation Name

Albercy Inc.

Principal Place of Business Mailing Address
5779 S.W. 8th.
Miami Florida 33144

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29

3. Date Incorporated or Qualified	3a. Date of Last Report
6/12/73	5/1/97
4. FEI Number	Applied For
65-04	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

Raymol Suarez
5779 SW 8th.
Miami Florida 33144

10. Name and Address of New Registered Agent

81 Name	Jorge Gaviña
82 Street Address (P.O. Box Number is Not Acceptable)	9769 So Dixie Hwy.
83	#201
84 City	Miami
85 Zip Code	33156

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 of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

8/1/97

12. OFFICERS AND DIRECTORS

TITLE	Raymol Suarez	DELETE
NAME	5779 S.W. 8th.	
STREET ADDRESS	Miami FL 33144	
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P.D.	Change	Addition
1.2 NAME	Mercedes Rodriguez		
1.3 STREET ADDRESS	25 S.W. 47th Ave.		
1.4 CITY-ST-ZIP	Miami Florida 33134		
2.1 TITLE	U.P. D	Change	Addition
2.2 NAME	Martin de los Angeles Modarse		
2.3 STREET ADDRESS	25 S.W. 47th Ave.		
2.4 CITY-ST-ZIP	Miami Florida 33134		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME	30000226653		
6.3 STREET ADDRESS	-08/14/97--01002--030		
6.4 CITY-ST-ZIP	***61.25		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raymol Suarez Pres. 8/1/97

Date

Daytime Phone

CR2F034 (9/96)