

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

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Apr 25 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 # P93000044803 (3)
1. Corporation Name
EX NIHILO, INC.



Principal Place of Business: 21410 W DIXIE HWY, NORTH MIAMI BEACH FL 33180, US
Mailing Address: 2151 NE 212TH STREET, NORTH MIAMI BEACH FL 33179-1642

2. Principal Place of Business: 21 17826 NE 5th AVE, Suite, Apt. #, etc. 22
23 City & State: N MIAMI BCH, FL
24 Zip: 33162-1008, Country: US
25
26 Mailing Address: 26 17826 NE 5th AVE, Suite, Apt. #, etc. 27
28 City & State: NORTH MIAMI BEACH, FL
29 Zip: 33162-1008, Country: US
30

3. Date Incorporated or Qualified: 06/24/1993
3a. Date of Last Report: 04/12/1996
4. FEI Number: 65-0468201
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
BAGDADI, DINO
2151 NE 212TH ST
NORTH MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent
81 Name: BAGDADI, DINO
82 Street Address (P.O. Box Number is Not Acceptable): 17890 W DIXIE HWY #514
83
84 City: NORTH MIAMI BEACH FL
85 Zip Code: 33160

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: *Dino Bagdadi* DATE: 1/7/97

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	BAGDADI, DINO	
STREET ADDRESS	2151 NE 212TH ST	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33179	
TITLE	DVTS	<input type="checkbox"/> DELETE
NAME	BAGDADI, RONNY	
STREET ADDRESS	2151 NE 212TH ST	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33179	
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	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BAGDADI, DINO	
1.3 STREET ADDRESS	17890 W DIXIE HWY #514	
1.4 CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	
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		

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: *Dino Bagdadi* DATE: 1/7/97

CR2E034 (9/96)