

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 29 1997 8:00am
Secretary of State

DOCUMENT # P93000057259 (2)

1. Corporation Name

MONSALVE GROUP CORPORATION, U.S.A.

Principal Place of Business

4460 CARVER ST
SUITE A
LAKE WORTH FL 33461
US

Mailing Address

4460 CARVER ST
SUITE A
LAKE WORTH FL 33461-2723
US

3. Date Incorporated or Qualified
08/12/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 2555 North Dixie Hwy

Suite, Apt. #, etc.

22

City & State

23 Lake Worth, FL

Zip

24 33460

Country

25

2a. Mailing Address

27 2555 North Dixie Hwy

Suite, Apt. #, etc.

28

City & State

28 Lake Worth, FL

Zip

29 33460

Country

30

4. FEI Number
65-0431020

Applied For
Not Applicable

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

UHLEY, LANCE S
15670 LINDBERG LANE
WEST PALM BEACH FL 33414

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 607.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST

NAME MONSALVE, LUISA I
STREET ADDRESS 1941 CANTERBURY CIRC
CITY-ST-ZIP WELLINGTON FL

TITLE VP

NAME MONSALVE, PEDRO J JR
STREET ADDRESS 1941 CANTERBURY CIRC
CITY-ST-ZIP WELLINGTON FL

TITLE ST

NAME MONSALVE, PEDRO J JR.
STREET ADDRESS 1941 CANTERBURY CIRC
CITY-ST-ZIP WELLINGTON FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100002205871
-06/09/97--01101--018
***165.00

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 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.

CR2E034 (9/96)