

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jul 01 1996 8:00 am
Secretary of State

DOCUMENT # P93000058356 (5)

1. Corporation Name

DUNAN INTERNATIONAL, CORP.



Principal Place of Business Mailing Address
1001 SE 11 ST 1001 SE 11 ST
HIALEAH FL 33010 HIALEAH FL 33010

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 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

CASTANEDO, JUANNY
9290 SW 34TH STREET
MIAMI FL 33165

3. Date Incorporated or Qualified 08/16/1993 3a. Date of Last Report 09/11/1995

4. FEI Number 65-0435444 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

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 signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PO	DELETE
NAME	GUTIERREZ, JESUS R	
STREET ADDRESS	4241 SW 149 CT	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	DELETE
NAME	GUTIERREZ, ILEANA	
STREET ADDRESS	1001 S.E. 11TH STREET	
CITY-ST-ZIP	HIALEAH FL 33010	
TITLE	TR	DELETE
NAME	FITZGERALD, IVONNE	
STREET ADDRESS	1001 S.E. 11TH ST.	
CITY-ST-ZIP	HIALEAH FL 33010	
TITLE	S	DELETE
NAME	GUTIERREZ, MARIA I	
STREET ADDRESS	1001 S.E. 11TH STREET	
CITY-ST-ZIP	HIALEAH FL 33010	
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	S	Change	Addition
1.2 NAME	GUTIERREZ, JESUS R.		
1.3 STREET ADDRESS	4241 SW 149 CT		
1.4 CITY-ST-ZIP	MIAMI, FL 33125		
2.1 TITLE	P	Change	Addition
2.2 NAME	GUTIERREZ, ILEANA		
2.3 STREET ADDRESS	1001 S.E. 11TH ST.		
2.4 CITY-ST-ZIP	HIALEAH, FL 33010		
3.1 TITLE	TR	Change	Addition
3.2 NAME	SANCHEZ, CARMEN		
3.3 STREET ADDRESS	1001 S.E. 11 ST		
3.4 CITY-ST-ZIP	HIALEAH, FL 33010		
4.1 TITLE	VP	Change	Addition
4.2 NAME	BURKE, JOSEPH T.		
4.3 STREET ADDRESS	1001 S.E. 11 ST.		
4.4 CITY-ST-ZIP	HIALEAH, FL 33010		
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			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ileana Gutierrez ILEANA GUTIERREZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT

6/24/96

828-6443

CR2E034 (3/96)