

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **993000070711**

1. Corporation Name
THEOREMA GROUP INC.

99 MAY 11 PM 2:12

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**200 S. BISCAYNE BLVD
SUITE 4815
MIAMI, FL 33131**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 **1001 BRICKELL BAY DR.** 26
Suite, Apt #, etc. Suite, Apt #, etc.
22 **1508** 27
City & State City & State
23 **MIAMI FL** 28
Zip Country Zip Country
24 **33131** 29 **V.P.A.** 30

3. Date Incorporated or Qualified **10/12/1993**
4. FEI Number **65-0445381** 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 owes the current year Intangible Personal Property Tax Yes No

9. Name and Address of Current Registered Agent
**SALUSSOLA PIERO
200 S. BISCAYNE BLVD.
SUITE 4815
MIAMI, FL 33131**

10. Name and Address of New Registered Agent
81 Name **ANGELO PIZZUTO**
82 Street Address (P.O. Box Number is Not Acceptable) **1001 BRICKELL BAY DRIVE**
83 **SUITE 1508**
84 City **MIAMI** FL 85 Zip Code **33131**

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 *Angelo Pizzuto* **ANGELO PIZZUTO** DATE **5/10/1999**

12. OFFICERS AND DIRECTORS

TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	BIANCHI MARIO
STREET ADDRESS	VIA CABRAL 60
CITY-ST-ZIP	CATOLICA - ITALY
TITLE	D <input type="checkbox"/> DELETE
NAME	DIACHILLE FILIBERTO
STREET ADDRESS	VIA FLAMINIA 399/A
CITY-ST-ZIP	RIMINI - ITALY
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	FUENTES CARMEN
STREET ADDRESS	200 S. BISCAYNE BLVD, # 4815
CITY-ST-ZIP	MIAMI, FL 33131
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

11 TITLE	DVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	ANGELO PIZZUTO
13 STREET ADDRESS	1001 BRICKELL BAY DRIVE, # 1508
14 CITY-ST-ZIP	MIAMI, FL 33131
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	400002874464-3
23 STREET ADDRESS	-05/13/99 -01109-005
24 CITY-ST-ZIP	***150.00 ***150.00
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	



14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f) 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, with all other like empowered

SIGNATURE: *Angelo Pizzuto* **ANGELO PIZZUTO** PRES. DATE: **5/10/1999** (305) 536-0100