FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DOCI	1996 UMENT # P930	DIVISION OF	CORPORAT	IONS		
1. Corpora	RIBE PESCA S.A. INC.	000076875 (2	2)			
Principal Pla	Principal Place of Business Mailing Address					(4 BB/H 96(H) (0019 BH/9/ 1911) (900) (141 480)
2840 SW Miami Fl	/ 98TH CT L 33165	2840 SW 98TH CT Miami FL 33165				
					3. Date Incorporated or Qualified 11/05/1993	3a. Date of Last Report 05/01/1995
2. Principal	Place of Business 2a. Mailing Address 26				4. FEI Number	Applied For
Suite, Ap	pt. #, etc.	Suite, Apt. #, etc.			65-0449439	Not Applicable \$8.75 Additional
City & State		27			5. Certificate of Status Desired	Fee Required
23	(a)e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Ζ(ρ 24	Country	Zip	Country	,	This corporation has liability for	Added to Fees
24	9. Name and Address of Cu	rrent Begistered Apent	30		Florida Statutes 🔲 Yes	🔀 No
		Tom Hogistetto Agent	81	Name	10. Name and Address of New R	egistered Agent
	HADO, DANIS R		82	Street 6	Address (P.O. Box Number is Not Acceptab	IA)
	SW 98TH CT			- Ciroci i		
MIAM	II FL 33165		83			
			84	City		FL 85 Zip Code
or regist familiar v SIGNATURE					rporation submits this statement for the pur poard of directors. I hereby accept the apporance of directors and the purpose of	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
THILE	D CRUZ, JOSE A A	☐ DELETE	1.1 TITLE			Change Addition
STREET ADDRESS			1.2 NAME	ADDOCCO		
CITY-SI-ZIP	MIAMI FL 33165		1.3 STREET ADDRESS			
TIFLE	D	☐ DELETE	2 1 TITLE			Change Addition
NAME STOCKE ADDRESS	HEVIA, RUAL A		2 2 NAME			
STREET ADDRESS CITY -ST - ZIP	28/40 SW 98TH CT MIAMI FL 33165		2 3 STREET ADDRESS			
Tille	D	DELETE	3.1 TIFLE			
NAME	AGUILA, JOSE JR	_	3 2 NAME			Change Addition
STHEFT ADDRESS	2840 SW 98TH CT		3.3. STREET	ADDRESS		
CHY-ST-ZIP	MIAMI FL 33165		3 4 CITY-ST-ZIP			
TITLE NAME	D HEVIA, RAFAEL A	DELETE	4.1 TITLE			Change Addition
STREET AUDRESS	_		4.2 NAME 4.3 STREET ADDRESS			
	MIAMI FL 33165		4.4 CRY-ST-ZIP			
CITY+S1-ZIP			441.//۲-			
		DELETE	5 1 TITLE			Change
CITY-ST-ZIF TITLE NAME		☐ DELETE				☐ Change ☐ Addition
DILE NAME STREET ADDRESS		☐ DELETE	5 1 TITLE 5 2 NAME 5 3 STREET /	ADDRESS .		☐ Change ☐ Addition
TITLE NAME			5 1 TITLE 5 2 NAME 5 3 STREET / 5 4 CITY - ST	ADDRESS .		
DITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5 1 TITLE 5 2 NAME 5 3 STREET / 5 4 CITY - ST 6. 1 TITLE	ADDRESS .		☐ Change ☐ Addition ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE			5 1 TITLE 5 2 NAME 5 3 STREET / 5 4 CITY - ST	ADDRESS - ZIP		

cettly 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 appears in Block 12 or Block 13 if shanged, or on an attachment with an address.

SIGNATURE:

Panis F. Machado

1/12/96

(305)221-5865