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Jun 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra R. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000086507 (9)

1. Corporation Name
PHIL-USA TRANSFER INT'L, INC.



Principal Place of Business

1204 S 22ND STREET A
TAMPA FL 33605
US

Mailing Address

1204 S 22ND STREET A
TAMPA FL 33605-6816
US

3. Date Incorporated or Qualified

12/17/1993

3a. Date of Last Report

06/07/1996

2. Principal Place of Business

21 4515 W. HANNA

Suite, Apt. #, etc.

AVE. #B

22 City & State

23 TAMPA FL

24 Zip

33614

Country

25 USA

2a. Mailing Address

26 4515 W. HANNA

Suite, Apt. #, etc.

AVE. #B

27 City & State

28 TAMPA FL

29 Zip

33614

Country

30 USA

4. FEI Number

59-3217077

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

BILBAO, EDGARDO A
1204 SOUTH 22ND STREET-
TAMPA FL 33605

4515 W. Hanna Ave.
Tampa, FL 33614

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

D
NAME
BILBAO, EDGARDO A
STREET ADDRESS
4515 W. HANNA AVE.
CITY-ST-ZIP
TAMPA FL 33614

DELETE

2.1 TITLE

D
NAME
KENYON, LEE
STREET ADDRESS
11211 THICKET COURT
CITY-ST-ZIP
TAMPA FL 33624

DELETE

3.1 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

4.1 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

5.1 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

6.1 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

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

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

EDGARDO A. BILBAO

6/6/97

(813)

881-2237

CR2E034 (9/96)