FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P93000086870 (1)

1. Corporation Name
STANA, INC.

Principal Place of Business
3100 NW 72 AVENUE
SUITE 126
MIAMI FL 33122
US

Mailing Address
8551 W. SUNRISE BLVD.
SUITE 100A
FT. LAUDERDALE FL 33322

3. Date Incorporated or Qualified: 12/20/1993
3a. Date of Last Report: 06/20/1995
4. FEI Number: 65-0457637 ☐ 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

2. Principal Place of Business
21 8551 W. Sunrise Blvd.
Suite, Apt. #, etc.
22 Suite 100A
City & State
23 Ft. Lauderdale FL
Zip
24 33322
Country
25

2a. Mailing Address
26 ~~[illegible]~~
Suite, Apt. #, etc.
27
City & State
28 ~~[illegible]~~
Zip
29 ~~[illegible]~~
Country
30

9. Name and Address of Current Registered Agent
BLOOMGARDEN, PAUL M
8551 W. SUNRISE BLVD.
SUITE 100A
FT. LAUDERDALE FL 33322

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 X [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

TITLE	P	☒ DELETE
NAME	NAMAD, ROBERTO	
STREET ADDRESS	3100 NW 72 AVENUE, #126	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☐ DELETE
NAME	STAMBOULI, ESTHER	
STREET ADDRESS	3100 NW 72 AVENUE, #126	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	☒ DELETE
NAME	NAMAD, GISELA	
STREET ADDRESS	3100 NW 72 AVENUE, #126	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	☐ DELETE
NAME	STAMBOULI, ALBERTO	
STREET ADDRESS	3100 NW 72 AVENUE, #126	
CITY-ST-ZIP	MIAMI FL	
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	100001826011	
5.3 STREET ADDRESS	-05/17/96--01001--027	
5.4 CITY-ST-ZIP	***200.00	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		5-1-96

CR2E034 (12/95)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X [signature] ESTHER STAMBOULI, Director X April 22, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
407-485-9242