

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 # **P93000088497 (1)**

1. Corporation Name

OVERSEAS SERVICE INTER-AMERICANA INC.



Principal Place of Business

2289 WINDSOR RD
PALM BEACH GARDENS FL 33410

Mailing Address

2289 WINDSOR RD
PALM BEACH GARDENS FL 33410

3. Date Incorporated or Qualified
01/01/1994

3a. Date of Last Report
07/13/1995

4. FEI Number
65-0458713

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

10. Name and Address of New Registered Agent

CORPORATE CREATIONS ENTERPRISES INC
4521 PGA BLVD
PALM BEACH GARDENS FL 33418

81 Name **PAUL HOGAN**

82 Street Address (P.O. Box Number is Not Acceptable)

1100 NORTH POINT PARKWAY

83 **#100**

84 City **WEST PALM BEACH**

FL

85 Zip Code **33407**

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 for this filing

DATE

4/4/96

12. OFFICERS AND DIRECTORS DELETE

TITLE **D**
NAME **HOGAN, PAUL**
STREET ADDRESS **% 2289 WINDSOR RD**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE **V**
1.2 NAME **VAUGHAN, LEMOYNE**
1.3 STREET ADDRESS **618 ROSA CT**
1.4 CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

TITLE DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lemoine Vaughan **LEMOYNE H VAUGHAN**
VP OF OPERATIONS

2/2/96 **407-683-4090**
4/4/96 **407-683-4090**

CR2E034 (12/95)