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

FILED
Apr 10 1996 8:00 am
Secretary of State

DOCUMENT # P94000002320 (7)

1. Corporation Name

OSARIS CORP.

Principal Place of Business
2697 W. 76TH ST.
HIALEAH FL 33016

Mailing Address
2697 W. 76TH ST.
HIALEAH FL 33016

2. Principal Place of Business
21 2348 W. 77 ST.
Suite, Apt. #, etc.
22
City & State
23 Hialeal Fla.
Zip 24 33016
Country 25 U.S.A.

2a. Mailing Address
26 2348 N. 77 ST.
Suite, Apt. # etc.
27
City & State
28 Hialeal Fl
Zip 29 33016
Country 30 U.S.A.

3. Date Incorporated or Qualified: 01/03/1994
3a. Date of Last Report: 06/22/1995
4. FEI Number: 65-0460252 — [ ] 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 [X] No

9. Name and Address of Current Registered Agent

PEREZ, ESTEBAN
2697 W. 76TH ST.
HIALEAH FL 33016

10. Name and Address of New Registered Agent
81 Name: Perez Esteban
82 Street Address (P.O. Box Number is Not Acceptable): 9122 NW 148 ST
83
84 City: Miami Lakes FL 85 Zip Code 33016

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 4-2-96

12. OFFICERS AND DIRECTORS

TITLE	PDST	[ ] DELETE
NAME	PEREZ, ESTEBAN	
STREET ADDRESS	1697 W 76TH STREET	
CITY-ST-ZIP	HIALEAH FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	PDST	[X] Change [ ] Addition
1.2 NAME	Perez Esteban	
1.3 STREET ADDRESS	9122 NW 148 ST.	
1.4 CITY-ST-ZIP	Miami Lakes - Fl - 33016	
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		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4-2-96 — Daytime Phone #