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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000012237 (1)

14. I do hereby certify that the information supplied with this filing does no information indicated on this annual report or supplemental annual report a man afficer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if changed, or on an attachment with

OVERSEAS MINING CO. INC.

Principal Place of Business Mailing Address 2320 West Flagler St. 1140 NW 194 AVE PEMBROKE PINES FL 33029-2985 MIAMI FL 93135 3. Date Incorporated or Qualified 3s. Date of Last Report 02/09/1994 04/25/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0468839 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Zip Country Zip 8. This corporation has liability for intengible tax under s. 199.032, 29 30 Florida Statutes Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HART, DAVID J 100 N BISCAYNE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1717** 83 PEMBROKE PINES FL 33029 84 City 85 Zip Codo 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 agont, 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) 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6)DELETE Change Addition TITLE 1.1 TITLE **FURNAGUERA, JOSE** NAME 1.2 NAME 1140 NW 194 AVE STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **CARLOS BERRIOS** NAME 2.2 NAME 1140 NW 194 AVE STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition . MILE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS DITY-ST-ZIP 3.4. C/TY - S1 - ZIP TITLE DELETE 4.1 Tritle Change ___ Addition NAME -4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TIDE TITLE NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS City-ST-ZIP 5.4 C/TY - ST - Z/P __ DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the rt is true and accurate and that my signature shall have the same legal effect as if made under oath; that powered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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