

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000056066 (1)

1. Corporation Name
ANHYDRIDE MARKETING, INC.



Principal Place of Business 9100 S DADELAND BLVD SUITE 410 MIAMI FL 33156 US	Mailing Address 9100 S DADELAND BLVD SUITE 410 MIAMI FL 33156 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 P.O. Box 566120 Suite, Apt. #, etc. 22 City & State 23 MIAMI, FL. Zip 24 33256-6120		2a. Mailing Address 26 P.O. Box 566120 Suite, Apt. #, etc. 27 City & State 28 MIAMI, FL. Zip 29 33256-6120		3. Date Incorporated or Qualified 07/25/1994	
Country 25 USA		Country 30 USA		4. FEI Number 59-3290755 Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BRID, DEMETRIO
9100 S DADELAND BLVD
SUITE 410
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name DEMETRIO BRID	85 Zip Code 33156
82 Street Address (P.O. Box Number is Not Acceptable) 9352 SW 77 AV.	
83 #14-8	
84 City MIAMI	FL

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 *Demetrio Brid - PRESIDENT*

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/26/98
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRID, DEMETRIO	1.2 NAME	
STREET ADDRESS	9100 S DADELAND BLVD., SUITE 410	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEGGIO, FRANSCECO	2.2 NAME	
STREET ADDRESS	TORRE MARIANA, PISO 5-OFC. 5A EL ROSAL	2.3 STREET ADDRESS	
CITY-ST-ZIP	CARACAS 1060 VZ	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEGGIO, SAVERIO	3.2 NAME	
STREET ADDRESS	TORRE MARIANA, PISO 5-OFC. 5A EL ROSAL	3.3 STREET ADDRESS	
CITY-ST-ZIP	CARACAS 1060 VZ	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 in an attachment with an address.

SIGNATURE

Demetrio Brid

1/26/98

(205) 412-0057

CR2E034 (10/97)