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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000064470 1. Corporation Name GOLD MINE FARM INC.					
Principal Place of Business 1995 ALT 193. TARPOON SPRINGS FL. 34689			Mailing Address SAME		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 08/29/94 3a. Date of Last Report 07/24/97 4. FEI Number 59-3265882 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent Amro El Alami 1995 ALT 193 TARPOON SPRINGS FL. 34689			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 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 NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT AMRO EL ALAMI 1995 ALT 193 TARPOON SPRINGS FL. 34689 [DELETE] [DELETE] [DELETE] [DELETE] [DELETE]			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE VICE PRESIDENT, TREASURER 12 NAME OSAMA EL ALAMI 13 STREET ADDRESS 1995 S. ALT 19 14 CITY-ST-ZIP TARPOON SPRINGS FL. 34689 21 TITLE [Change] [Addition] 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE [Change] [Addition] 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE [Change] [Addition] 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE [Change] [Addition] 52 NAME 400002263644-3 53 STREET ADDRESS -08/11/97--01058--002 54 CITY-ST-ZIP *****61.25 *****61.25 61 TITLE [Change] [Addition] 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP		

14. I do 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 on an attachment with an address.

SIGNATURE:

Amro El Alami
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

08/11/97.

Date

Daytime Phone #

CR2E034 (9/96)