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

PROFIT CORPORATION ANNUAL REPORT 1997



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000074531 (2)

I.S.C.A. INTERNATIONAL CORPORATION

FILED Apr 21 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address			
2300 SW 3RD AVENUE		2300 SW 3RD AVENUE			
#1		#1			
MIAMI FL 33129 US		MIAMI FL 33129-2038 US		3. Date Incorporated or Qualified	3a. Date of Last Report
				10/11/1994	02/15/1996
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0536080	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27		b. Certificate of Status Desired	Feo Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	T	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25 9. Name and Address of Current	29	[30]	Florida Statutes 10. Name and Address of New Reg	Yes No
GORRIZ, DOMINGO				GORRIZ, DOMIN	160
1000 BRICKELL AVENUE B2 Street Addr				iress (P.O. Box Number is Not Acceptab 501 SW 8TH	e) cToccT
1 8418141 #1 44144					31 8661
MICH	N FE 33 13 1			SVITE 211	
			184 Cilv	IAMI	FL 85 Zip Code 33/35
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508. Horida Statut	es the above parned cor	noration submits this statement for the p	urpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Horida 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 Statules.					
SIGNATURE Signature, typied or product name of registered agent and title if applicable (NOT) - Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 THL€		Change Addition
NAME	GONZALEZ, HOMERO		1.2 NAME		1
STREET ADDRESS	2300 SW 3RD AVENUE, # 1		1.3 STREET ADDRESS		ìi
CITY-ST-ZIP	MIAMI FL		1.4 C(1Y - ST - Z(P	·	
TITLE	D	☐ DELETE	2.1.11/1.(Change Addition
NAME	GONZALEZ, MELANIE S		2.2 NAME		
STREET ADDRESS	2300 SW 3RD AVENUE, # 1		23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2 4 CITY - \$1 - 7H2		
TITLE		L.J DELETE	3 1 11TLE		Change Addition
- NAME			3.2 NAME		Ī
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-7iP	·	Change Addition
TITLE		T-DETE IF	4.1 TOLE		L_ Change L_ Addition
NAME .			4. 2 NAM(
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 City-S1-7iP		Change Addition
TITLE		Chinter	5.1 1011 €		Li onange Lii vooltion
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CDY- \$1-ZIP		Change Addition
TITLE		נייז מננננ	6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 C/TY - \$1 - 7/P	· · · · · · · · · · · · · · · · · · ·	

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 trusted 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, one of the corporation with an address