


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

FILED

Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name <p>P94000079077</p> <p>Greebstem Inc.</p>					
Principal Place of Business 337 S.W. 20th Road Miami Fl. 33129		Mailing Address			
2. Principal Place of Business 21. same		2a. Mailing Address 26. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 10/27/94	
22. City & State		27. City & State		3a. Date of Last Report	
23. Zip		28. Zip		4. FEI Number 65-0531258	
24. Country		29. Country		5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	
25. Country		30. Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
9. Name and Address of Current Registered Agent Jorge Cardenas 337 S.W. 20th Road Miami Fl. 33127			10. Name and Address of New Registered Agent		
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.			81. Name		
SIGNATURE			82. Street Address (P.O. Box Number is Not Acceptable)		
12. OFFICERS AND DIRECTORS			83. City		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			84. FL		
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 on an attachment with an address.			85. Zip Code		
15. SIGNATURE: <i>Jorge Cardenas</i>			400002154544 -04/25/97--01007--013 ***165.00		

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