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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000089435 (9)

EXUR CORPORATION

MIAMI FL 33172

FILED Apr 27 1998 8:00am Secretary of State

						PA	
Principal Place of Business		Mailing Address			E TOBINDAL LIN TRINL RIDIT GRAIT CRIVI DESIX ROHAN INITIN 19	int Atabla Hill Bhit isal	
14533 SW 155 PLACE MIAMI FL 33196		1985 NW 88TH CT. 201 Miami Fl 33172			DO NOT WRITE IN THIS SPA	CE	
		MIRMI PE 3317	MIRMI FL 33172		3. Date Incorporated or Qualified 12/09/1994		
2. Principal Place of Business		2s. Mailing Address			4. FEI Number	Applied For	
21		26			65-0583801	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	30 Co.	untry	8. This corporation owes or has paid the current Personal Property Tax due June 30.		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CORBO-RODRIGUEZ, CARMEN 1985 N.W. 88TH COURT SUITE 201				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)			

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.

City

SIGNATURE			
40		TE Registered Agent signature requi	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1.1 TITLE	Change Addition
NAME	CANO, JULIO C	1.2 NAME	
STREET ADDRESS	FEDERICO GARCIA LIORCA 8220	1.3 STREET ADDRESS	
CITY-ST-ZIP	MONTEVIDEO URUGUARY	14 CITY-ST-ZIP	
TITLE	DELETE	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2. 4 CITY - ST - ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY+ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, CT. 7IP		64 CITY_ST_7IP	

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 roceiver 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 a paddress

SIGNATURE:

JULIO C. CANO

4.7.98

(305)2057443.