

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

**FILED**  
**Apr 18 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000008038 (8)**  
 1. Corporation Name  
**NORTH AMERICAN PURCHASING INTERNATIONAL INC.**



Principal Place of Business <b>9455 S.W. 5 LANE MIAMI FL 33174</b>	Mailing Address <b>9455 S.W. 5 LANE MIAMI FL 33174-2111</b>
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3. Date Incorporated or Qualified <b>01/31/1995</b>	3a. Date of Last Report <b>06/20/1996</b>
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2. Principal Place of Business <b>21 13408 S.W. 17th Cir S</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26 13408 S.W. 17th Cir S</b> Suite, Apt. #, etc.
22. City & State <b>23 Miami, FL</b>	27. City & State <b>28 Miami, FL</b>
24. Zip <b>33175</b>	25. Country <b>U.S.A</b>
29. Zip <b>33175</b>	30. Country <b>U.S.A</b>

4. FEI Number <b>65-0559834</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent <b>RUIZ, GILBERTO 9455 S.W. 5 LANE MIAMI FL 33174</b>	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b> 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>D</b>	
NAME	<b>RUIZ, GILBERTO</b>	
STREET ADDRESS	<b>9455 S.W. 5 LANE</b>	
CITY-ST-ZIP	<b>MIAMI FL 33174</b>	
TITLE	<b>D</b>	
NAME	<b>CONTRERAS, LUIS</b>	
STREET ADDRESS	<b>7489 S. WATER WAY DR.</b>	
CITY-ST-ZIP	<b>MIAMI FL 33155</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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 bears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (9/96)

**TITLE: Gilbert Ruiz** *[Signature]* **4/18/97**