

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

**FILED**

**Apr 30 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
--	---	---

**DOCUMENT # P95000045491 (4)**

1. Corporation Name  
**BOGA GROUP INC.**



Principal Place of Business <b>14400 SW 78 AVE. MIAMI FL 33158</b>	Mailing Address <b>14400 SW 78 AVE. MIAMI FL 33158-1628</b>
---	--

3. Date Incorporated or Qualified <b>06/13/1995</b>	3a. Date of Last Report <b>11/12/1996</b>
4. FEI Number <b>65-0588248</b>	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> 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	

2. Principal Place of Business 21 <b>SAME</b>	2a. Mailing Address 26 <b>SAME</b>
22 Suite, Apt. #, etc. <b>SAME</b>	27 Suite, Apt. #, etc. <b>SAME</b>
23 City & State <b>SAME</b>	28 City & State <b>SAME</b>
24 Zip Country	29 Zip Country
25	30

**9. Name and Address of Current Registered Agent**

**BATTLE-OLSEN, CELINA  
14400 SW 78 AVE.  
MIAMI FL 33158**

**10. Name and Address of New Registered Agent**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	<b>GONZALEZ, ILEANA</b> 14400 SW 78 AVE MIAMI FL 33158	1.1 TITLE <b>D</b>	<b>Timothy Weissenborn</b> 14400 SW 78 AVE Miami, FL 33158
TITLE <b>D</b>	<b>Battle Celina</b> OLSEN, CELINA 14400 SW 78 AVE. MIAMI FL 33158	2.1 TITLE <b>Celina Battle</b>	<b>14400 SW 78 AVE</b> MIAMI, FL 33158
TITLE <b>D</b>	<b>BATTLE, ROBERTO</b> 14400 SW 78 AVE MIAMI FL 33158	3.1 TITLE	
TITLE <b>D</b>	<b>BATTLE, VICTORIA</b> 14400 SW 78 AVE MIAMI FL 33158	4.1 TITLE	
TITLE <b>D</b>	<b>BATTLE, MAURICIO</b> 14400 SW 78 AVE MIAMI FL 33158	5.1 TITLE	
TITLE		6.1 TITLE	

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: *Celina Battle Olsen* 4/14/97 (305) 251-2897  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)