

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

FILED
May 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Morthahn Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *P 9500 00 53 281*
1. Corporation Name

KRICIA, Inc

Principal Place of Business Mailing Address
2700 WEST ATLANTIC BLVD, SUITE 2718
Pompano Beach FL 33069

2. Principal Place of Business 21 <i>2700 WEST ATLANTIC BLVD</i>	2a. Mailing Address 28 <i>2700 WEST ATLANTIC BLVD</i>
Suite, Apt. #, etc. 22 <i># 2718</i>	Suite, Apt. #, etc. 27
City & State 23 <i>Pompano Beach FL</i>	City & State 28
Zip 24 <i>33069</i>	Country 25 <i>USA</i>

3. Date Incorporated or Qualified <i>07/11/95</i>	3a. Date of Last Report
4. FEI Number <i>65-0745126</i>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
EVA GOMEZ
2700 WEST ATLANTIC BLVD #2718
Pompano Beach FL 33069

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *Eva Gomez* (NOTE: Registered Agent signature required when reinstating) DATE *4/28/97*

12. OFFICERS AND DIRECTORS

TITLE	<i>President</i>	<input type="checkbox"/> DELETE
NAME	<i>Juan Guillermo Mesa Taramila</i>	
STREET ADDRESS	<i>9260 24th CT</i>	
CITY-ST-ZIP	<i>Sunrise FL 33322</i>	
TITLE	<i>Vice-President</i>	<input type="checkbox"/> DELETE
NAME	<i>Margarita Gomez de Mesa</i>	
STREET ADDRESS	<i>9260 24th CT</i>	
CITY-ST-ZIP	<i>Sunrise FL 33322</i>	
TITLE	<i>Secretary</i>	<input type="checkbox"/> DELETE
NAME	<i>Eva Gomez</i>	
STREET ADDRESS	<i>9260 24th CT</i>	
CITY-ST-ZIP	<i>Sunrise FL 33322</i>	
TITLE	<i>Treasurer</i>	<input type="checkbox"/> DELETE
NAME	<i>Glenn Margaret Otalora</i>	
STREET ADDRESS	<i>9260 24th CT</i>	
CITY-ST-ZIP	<i>Sunrise FL 33322</i>	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	

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***165.00

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.

CR2E034 (9/96)