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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000055097 (6)

AMPLIMIDIA CORPORATION

Principal Place of Business S8SO LAKEHURST DRIVE SUITE 205 ORLANDO FL 32819		Mailing Address 5850 Lakehurst Drive Suite 205 Orlando fl 32819-8387			
				 Date incorporated or Qualified 07/14/1995 	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Culto Ant	# ato	26		59-3251124	Not Applicable
Sulte, Apt. #, etc.		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			\$5.00 May Be
23		28		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
24	25		30		Yes No
<u> </u>	9. Name and Address of Curren	it Registered Agent		10. Name and Address of New Re	· · · · · · · · · · · · · · · · · · ·
	PRIGUES, CAPILOS A.C.		B1 Name Ro	ODRIGUES, CARLOS	$\mathbf{A} \cdot \mathbf{C} \cdot \mathbf{A} \cdot \mathbf{C} \cdot $
1315 BRADWELL DRIVE			82 Street Addr	dress (P.O. Box Number is Not Acceptable)	
, ORL	ANDO FL 32837		83	SHINOAK DAIVE	
1			[83]		
		1.	84 City OR	LANDO	FL 85 Zip Code 32837
11. Pursuant	to the provisions of Sections 607.050	2 a 60 1508. Florida Statute	s, the above-named core	poration submits this statement for the o	urpose of changing its registered
office or registered agent, or both, in the State and a Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the appointment as registered agent. Lam familiar with, and accept the appointment as registered					
SIGNATURE				C	14/25/97
	Signature, typed or printed laborating stored age		Registered Agent signature requir		DATE
12.	OFFICERS ANI	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	RODRIGUES, JOSE' CARLOS	D DUTCE	1.1 TITLE		Change Addition
NAME OTOEST ADODESO	1315 BRADWELL DRIVE		1.2 NAME		
STREET ADDRESS	ORLANDO FL 32837		1.3 STREET ADDRESS		İ
CITY-ST-ZIP TITLE	VPD	DELFTE	14 CITY-ST-7iP 21 TITLE		Change Addition
NAME	DE CASTRO RODRIGUES . MA		2.2 NAME		
STREET ADDRESS	1315 BRADWELL DRIVE	4 11/1 420/1	2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32837		2.4 CfTY - ST- ZIP		
TITLE	STD	DELETE	3.1 7016	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	RODRIGUES, CARLOS A. C.		3.2 NAME		
STREET ADDRESS	1315 BRADWELL DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32837		3.4. C/TY - ST - ZIP	•	
TITLE		DELETE	4.1 TITLE		Change Add-tion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ĺ
CITY-SY-ZIP			4.4 CITY - ST - ZIP		
TITLE		DILLETE	5.1 1111.6		Change Addition
NAME			5.2 NAME		(2/2)
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		···-	5.4 CITY-S1-ZIP		uningst
TITLE			61 TITLE	G971259 6 -05/06/970100	Thange [_] Addition
NAME			6.2 NAME	***165.00	JC049
ATOTET LEADERS			■ A A CIDICA I DOGGGGG	**************************************	

14. I do hereby certify that the information supplied with this filling 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 supplementary unitar report is true and accurate and that my signature shall have the same legal effect as if made under eath: that I am an officer or director of the corporation or the record of fusite 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 a fusion ment with an address.

CIONATURE.

04/25/97 248-017

FILED

May 01 1997 8:00am

Secretary of State