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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

SIGNATURE:

14. I do hereby certify that the information supplied with this filing information indicated on this annual report or supplier until all I am an officer or director of the corporation or the reference appears in Block 12 or Block 13 if changed, or on an artistic help.



FLORIDA DEFARÎMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000063224 (6)

INFORMACION VIA SATELITE - INFOSAT INC. Principal Place of Business Mailing Address 7851 S.W. 6TH STREET 7851 S.W. 6TH STREET SUITE 104 SUITE 104 PLANTATION FL 33324 PLANTATION FL 33324-3211						
						3. Date Incorporated or Qualified
2. Principal Place of Business		28. Mailing Address 26				4. FEI Number Applied For 65-0652028 Not Applie
Suite, Apt.	•	Suite, Apt.				5. Certificate of Status Desired S8.75 Additiona Fee Required
City & State	е	City & Stat	o			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	Zip 29		Country 30		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No
	9. Name and Address of Curr					10. Name and Address of New Registered Agent
SALAS, RONALD 7951 S.W.6TH STREET SUITE 104 PLANTATION FL 33324				81 82 83	Name Street A	Address (P.O. Box Number is Not Acceptable)
				84	City	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registerio a OF FICERS A	ND DIRECTORS		13.	nt signature a	required when renstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	SALAS, RONALD 7951 SW 6TH STREET #104 PLANTATION FL		DELETE	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S		☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FERRE, JOSE A. 7951 SW 8TH STREET #104 PLANTATION FL		DELETE	2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-5	ADDRESS	☐ Change ☐ Addi
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. CMY-S	ADDRESS	☐ Change ☐ Add
TITLE NAME STREET ADDRESS			DELETE	4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CHY-S	andress	☐ Change ☐ Add
TITLE NAME STREET ADDRESS			DELETE	5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS	☐ Change ☐ Addi
TITLE NAME STREET ADDRESS			DELETE	5.4 CHY-S 6.1 THE 6.2 NAME 6.3 STREET		Change Addi

focs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the fluid report is true and accurate and that my signature shall have the same legal effect as if made under oath; that further empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

2/3/97

(954) 423-2401