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FILED

**May 16 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000073848 (0)

1. Corporation Name
ALGARVE HOLDINGS, INC.



Principal Place of Business: **601 BRICKELL KEY DRIVE SUITE 805 MIAMI FL 33131**

Mailing Address: **601 BRICKELL KEY DRIVE SUITE 805 MIAMI FL 33131-2649**

3. Date Incorporated or Qualified: **09/25/1995**

3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business

21. **501 Brickell Key Drive**

22. **602**

23. **Miami, FL**

24. **33131**

25. Country

26. **501 Brickell Key Drive**

27. **602**

28. **Miami, FL**

29. **33131**

30. Country

4. FEI Number: **65-0613408**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

ALLEN & GALEGO
601 BRICKELL KEY DRIVE
SUITE 805
MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name: **VESTEL INTERNATIONAL CORPORATION**

82. Street Address (P.O. Box Number is Not Acceptable): **501 Brickell Key Drive**

83. **Suite 602**

84. City: **Miami, FL**

85. Zip Code: **33131**

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: *[Signature]* DATE: **05/01/97**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE: **PSD** DELETE

NAME: **FONSECA, ANTONIO C**

STREET ADDRESS: **601 BRICKELL KEY DRIVE SUITE 805**

CITY- ST- ZIP: **MIAMI FL 33131**

TITLE: **VTD** DELETE

NAME: **FONSECA, ROSILENE S**

STREET ADDRESS: **601 BRICKELL KEY DRIVE SUITE 805**

CITY- ST- ZIP: **MIAMI FL 33131**

TITLE: **S** DELETE

NAME: **ALLEN, ROBERT N JR**

STREET ADDRESS: **601 BRICKELL KEY DRIVE**

CITY- ST- ZIP: **MIAMI FL 33131**

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

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: *[Signature]* DATE: **05/01/97** DAYTIME PHONE #: **305 358 8900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)