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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # P95000085482 (4)

Country

9. Name and Address of Current Registered Agent

25

RIBEIRO PERES, MARCUS V 8025 SW 107 AVENUE #203

MIAMI FL 33173

Y. P. NEW PROJECT, INC.

2. Principal Place of Business

Suite, Apt #, etc.

City & State

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Zip

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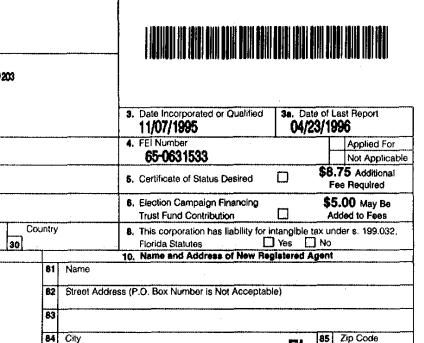
2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

FILED Feb 24 1997 8:00am Secretary of State



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. Lant familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.

		OTE: Registered Agent signature		DATE	··········
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO (
TITLE	D DELETE	1.1 TITLE		☐ Change	Addition
NAME	RIBEIRO PERES, MARCUS V	1.2 NAME			
STREET ADDRESS	8025 SW 107 AVENUE #203	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33173	1.4 CITY-ST-ZIP			
TITLE	D DELETE	2.1 TITLE		Change	Addition
NAME	NANCI, MATEUS F	2.2 NAME			
STREET ADDRESS	RUA PICO NEGRO 287 AGUA RASA SAO PAULO-SP	2.3 STREET ADDRESS		* .	
CITY-ST-ZiP	BRAZIL CEP: 03346-100	2 4 CITY-SY-2IP	<u> </u>		
TITLE	☐ DELETE	31 TITLE		Change	Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS		•	
CHY-SI-ZIF		3.4. CITY - ST-ZIP	·		
TITLE	DELETE	4.1 TITLE		Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY- ST-ZIP		4.4 CITY - ST - ZIP			
TITLE	☐ DELETE	5.1 Title		Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE		Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
C(TY - ST - ZIP		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 of 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 all integrment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PAINTS NAME OF SIGNING OFFICER OR DIRECTOR

02-18-97