

FILE NOW: FILING FEE AFTER MAY 1 IS \$55,000

FILED

Apr 07 1997 8:00am  
Secretary of State



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

PROFIT CORPORATION  
ANNUAL REPORT  
1997

DOCUMENT # P95000094836 (0)

1. Corporation Name  
CARTA BLANCA INVESTMENT CORP.



Principal Place of Business  
11360 S.W. 85TH ST  
MIAMI FL 33176

Mailing Address  
11360 S.W. 85TH ST  
MIAMI FL 33176-1104

3. Date Incorporated or Qualified: 12/14/1995  
3a. Date of Last Report: 04/25/1996  
4. FEI Number: 65-0659325  
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

2. Principal Place of Business  
21. 13800 S.W. 8th St  
22. Ste 103  
23. MIAMI, FL  
24. 33184  
25. USA  
2a. Mailing Address  
26. PO BOX 16-2086  
27. MIAMI, FL  
28. MIAMI, FL  
29. 33184  
30. USA

9. Name and Address of Current Registered Agent  
STEFANO, NANCY  
11360 S.W. 85TH ST  
MIAMI FL 33176

10. Name and Address of New Registered Agent  
81. Name: STEFANO NANCY  
82. Street Address (P.O. Box Number is Not Acceptable): 13800 SW 8th St  
83. Ste 103  
84. City: MIAMI FL  
85. Zip Code: 33184

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: *Nancy Stefano* (NOTE: Registered Agent's signature required when reinstating) DATE: 2/24/97

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	STEFANO, NANCY	
STREET ADDRESS	11360 S.W. 85TH ST.	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	STEFANO, NANCY	
1.3 STREET ADDRESS	13800 SW 8th St Ste 103	
1.4 CITY-ST-ZIP	MIAMI, FL 33184	
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		

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: *Nancy Stefano* DATE: 2/24/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)