

FILED

May 13 1997 8:00am
Secretary of State

<p>PROFIT CORPORATION ANNUAL REPORT 1997</p>		<p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>
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DOCUMENT # **P96000013064 (6)**

PROGONZA INTERNATIONAL SERVICES, INC.

Principal Place of Business	Mailing Address
6595 N.W. 36TH STREET #104 MIAMI FL 33166	6595 N.W. 36TH STREET #104 MIAMI FL 33166-6969



				3. Date Incorporated or Qualified 02/12/1996		3a. Date of Last Report	
2. Principal Place of Business				2a. Mailing Address		4. FEI Number	
21	460 Eldron Dr. #1 Suite, Apt. #, etc.			26	460 Eldron Dr. #1 Suite, Apt. #, etc.		Applied For
22	Miami Springs City & State FLORIDA			27	Miami Springs City & State FLORIDA		Not Applicable
23	Zip	Country		28	Zip	Country	
24	33166	U.S.A.		29	33166	U.S.A.	
				5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GONZALEZ, MIREYA E		81	Name
6505 N.W. 38TH STREET #104		82	Street Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33166		83	
		84	City
			FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS GONZALEZ, MIREYA E	1.1 TITLE	
NAME	460 ELDRON DRIVE #1	1.2 NAME	
STREET ADDRESS	MIAMI SPRINGS FL 33166	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	V GONZALEZ, JOSE S	2.1 TITLE	
NAME	460 ELDRON DRIVE #1	2.2 NAME	
STREET ADDRESS	MIAMI SPRINGS FL 33166	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	T MOLINA, LUIS A	3.1 TITLE	
NAME	6595 N.W. 38TH STREET #104	3.2 NAME	
STREET ADDRESS	MIAMI FL 33166	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - 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 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: MICHAEL MIREYA MICHAEL MIREYA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/97 (305) 888-8980
Date Daytime Phone #

CR2E034 (9/96)