

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

FILED
Feb 26 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 # P96000014866 (3)

1. Corporation Name
IDACA SUPPLIES, INC.



Principal Place of Business 1110 BRICKELL AVENUE 7TH FLOOR MIAMI FL 33131	Mailing Address 1110 BRICKELL AVENUE 7TH FLOOR MIAMI FL 33131
---	---

3. Date Incorporated or Qualified 02/16/1996	3a. Date of Last Report
--	-------------------------

2. Principal Place of Business 21 439-A W. VINE ST. Suite Apt. #, etc.	2a. Mailing Address 26 439-A W. VINE ST. Suite Apt. #, etc.
22 City & State 23 KISSIMMEE FL.	27 City & State 28 KISSIMMEE FL.
24 Zip 34741 25 Country OSCEOLA	29 Zip 34741 30 Country OSCEOLA

4. FEI Number 65-0660176	Applied For Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent GOULD, RONALD 1110 BRICKELL AVENUE 7TH FLOOR MIAMI FL 33131	10. Name and Address of New Registered Agent 81 Name IVAN NIEVES 82 Street Address (P.O. Box Number is Not Acceptable) 83 439 W. VINE ST 84 City KISSIMMEE FL 85 Zip Code 34741
---	---

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Ivan Nieves* DATE: **1/16/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PIETROBELLI, DANIEL		1.2 NAME	
STREET ADDRESS 1110 BRICKELL AVENUE 7TH FLOOR		1.3 STREET ADDRESS 439-A W. VINE ST.	
CITY- ST- ZIP MIAMI FL 33131		1.4 CITY- ST- ZIP KISSIMMEE FL. 34741	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PIETROBELLI, ANNUNZIO		2.2 NAME	
STREET ADDRESS 1110 BRICKELL AVENUE 7TH FLOOR		2.3 STREET ADDRESS	
CITY- ST- ZIP MIAMI FL 33131		2.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *X Daniel Pietrobello* DATE: **2/5/97**

CR2E034 (9/96)