

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000022182 (5)
Corporation Name
ORISA, INC.

FILED
97 OCT -7 PM 2:25

Principal Place of Business
**1565 S. OCEAN LANE
APT. 277
FT. LAUDERDALE FL 33316**

Mailing Address
**1565 S. OCEAN LANE
APT. 277
FT. LAUDERDALE FL 33316**

DO NOT WRITE IN THIS SPACE

21 Principal Place of Business
Suito, Apt. #, etc.
22 City & State
23 Zip Country
24 Name and Address of Current Registered Agent

25 Mailing Address
Suito, Apt. #, etc.
26 City & State
27 Zip Country
28 Name and Address of New Registered Agent

**BEHAR, LARRY J
888 S.E. THIRD AVE.
SUITE 400
FT. LAUDERDALE FL 33316**

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 *Larry J. Behar*

Signature, typed or printed name of registered agent and date of appointment

Signature, typed or printed name of registered agent and date of appointment

DATE

OFFICERS AND DIRECTORS

1. NAME
STREET ADDRESS
CITY-ST-ZIP

2. NAME
STREET ADDRESS
CITY-ST-ZIP

3. NAME
STREET ADDRESS
CITY-ST-ZIP

4. NAME
STREET ADDRESS
CITY-ST-ZIP

5. NAME
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11. NAME
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14. NAME
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15. NAME
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CITY-ST-ZIP

16. NAME
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CITY-ST-ZIP

17. NAME
STREET ADDRESS
CITY-ST-ZIP

18. NAME
STREET ADDRESS
CITY-ST-ZIP

19. NAME
STREET ADDRESS
CITY-ST-ZIP

20. NAME
STREET ADDRESS
CITY-ST-ZIP

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-10/15/97-01099--006
*******550.00 *****550.00**

I hereby certify that the information supplied with this form does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information supplied is true, correct and accurate and that my signature shall have the same legal effect as if made in person. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and I hereby agree to execute this report as required by Chapter 607, Florida Statutes, and that my name and address shall be printed on the report and attached to the report.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept. 4, 1997

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