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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000034311 (6)**

t am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or of the corporation of the

SIGNATURE:

KARIBI, INC. Mailing Address Principal Place of Business **601 BRICKELL KEY ORIVE 601 BRICKELL KEY DRIVE** SUITE 805 SUITE 805 MIAMI FL 33131-2649 MIAMI FL 33131 3. Date Incorporated or Qualified Sa. Date of Last Report 04/19/1996 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0670507 Not Applicable 21 26 Suite, Apt. #. etc. Suite, Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country Country $Z_{\rm ID}$ 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **ALLEN & GALEGO 601 BRICKELL KEY DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 805 63 MIAMI FL 33131 City 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 if am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 5. juliarity up or princed name of registered agorit and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. Change Addition DELETE 11118 1.1 TITLE Rabinovich MAM 1.2 NAME #805 Brickell Key Drive 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP CHY-S1-ZP DELETE Change Addition TIFLE 2.1 TITLE Rahmovich MAM 2.2 NAME Brickell Key Drive # 805 2.3 STREET ADDRESS STHEFT ADDRESS 2. 4 CITY-ST-ZIP CHY-ST ZIP DELETE 31 TITLE Change Addition N. Allen, Jr. 3.2 NAME MAME #805 601 Brickell Key Drive **33 STREET ADDRESS** STREET ADDRESS , FL 34. CITY+ST-ZIP 0HY-51-26 DELETE Addition Change 1.11.6 4.1 TITLE 4. 2 NAME STREET ADDRESS 4,3 STREET ADDRESS COY 51-781 4.4 CITY-ST-ZIP Addition DELETE 5.1 TITLE THILE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHY \$1-269 DELETE Addition 6.1 TITLE ☐ Chance THEF 62 NAME LAM STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - \$1 - ZIP C01Y - ST - 20P

14. Les hereby certily 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 every report to execute this report as required by Chapter 607, Florida Statutes; and that my name