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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mórtham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000037375 (8)

SEALANT INTERNATIONAL, INC.

Principal Place of Business Mailing Address 15257 S.W. 121TH ST. MIAMI FL 85196 15257 S.W. 1117H ST. MIAMI FL 33788-4523

FILED Feb 14 1997 8:00am Secretary of State



3. Date incorporated or Qualified 3a. Date of Last Report

					04/29/1996				
	ace of Business	2a. Mailing Address	2041. 3.		4. FEI Number		X Ap	plied For	
··	S.V. 139th Avenue	26 1211 S.W. 139th Avenue					t Applicable	1	
Suite, Apt. 1	#, @IC.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State	3	City & State			6. Election Campaign Financing		\$5.00	May Be	1
23 Miami.	Florida	28 Miami, Flor	28 Miami, Florida		Trust Fund Contribution		Added t		
Zip	Country	Žip	Count	try	8. This corporation has liability for	intangible t	ax under s.	199.032,	1
24 33184	25 USA	29 33184	30 USA			Yes			1
PPA	9. Name and Address of Curren	t Hegistered Agent		d Nome	10. Name and Address of New R	egistered A	gent		┨
FERREIRA, CARLOS				Mia	emi Corporate Systems,				
	57 S.W. 111TH ST.		82 Street Addre		ddress (P.O. Box Number is Not Accepta	(ble)	700		1
MIAI	VII PC 38196		<u>,</u>	3 520	00 Blue Lagoon Drive,	suite !	/00		┨
		\frown (\setminus	ľ	"			-		
	\sim		8	4 City	4	FL	85 Zip (Code 126	1
11. Pursuant t	o the provisions of Section 60/ 050	2 and 607 508 Florida Stat	ites the abo	Mia	and		Shanging it	LZD e registered	┨
office or re	egistored agent, or noth in the State	of Florida Such change was	authorized	by the core	orporation submits this statement for the oration's board of directors. I hereby according	purpose or operation	intment as	registered	
	n tariffiar with single-sept the obliga	alions of, Neclion 607:0505, F	olida Statul	8 ^{s.} _ } 7	*				
SIGNATURE		nt and title if applicable. (NO	TE Registered	oent signature in	equired when reinstating)	DATE			
12.	OF ICERS AND		13.		ADDITIONS/CHANGES TO OFFI		DIRECTOR	S IN 12	12
TITLE	PSD	▼ DELETE	1.1 TITL	E	DPT		Change	XX Addition	Ş
NAME	FERREIRA, CARLOŠ		1.2 NAM	E	CAYON, MAURICIO				3
STREET ADDRESS 15257 S.W. 111TH ST.			1.3 STRE	ET ADDRESS	1211 S.V. 139th Avenu	е			15
CITY-ST-ZIP	MIAMI FL 33196		1.4 CITY	-ST-ZIP	Miami, Florida 33184				١۵
TITLE		☐ DELETE	21 TITL	E	DS		Change	Addition	၂င
NAME			22 NAM	E	PACHECO, JOSEPH	i.			l
STREET ADDRESS		235		ET ADDRESS	16055 N.W. 64 Avenue,	#116			1
-€11Y-\$1-ZIP				-ST-ZIP	Miami, Florida 33184				1
THUE	☐ DELETE		31 TITL			ļ	Change	Addition	
NAME			3.2 NAM						
STREET ADDRESS				EET ADDRESS					l
CITY-ST-ZIP		DELETE		r-St-ZIP	· · · · · · · · · · · · · · · · · · ·		T (h	1 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-
TITLE NAME			4.1 1111			l	L Change	Addition	-
			4 2 NAN						
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CHY 5.1 TIFL	-ST-ZiP	·		☐ Change	Addition	┨
NAME		Decrie	5.2 NAM	· I			Onengo	L. Addition	
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TILLE		DELETE	61 TITL				Change	Addition	1
NAME			6.2 NAM	1					
STREET ADDRESS				ET ADDRESS					-
CITY-SI-ZIP				-ST-ZIP					-
	by certify that the information supplied	d with this filing does not qua			ated in Section 119.07(3)(i), Florida Statut	es. I further	certify that	the	1

annual report is true and accurate and that my signature shall have the same legal effect as it made under or or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the co appears in Block 12 or Block 13 OUT DMauricio Cayon, President

SIGNATURE:

(305) 388-6955