

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

FILED
Mar 19 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 # P96000037630 (6)

1. Corporation Name
SANDOMENICO REALINVEST CORP.



Principal Place of Business: **9100 S. DADELAND BLVD., SUITE 1700 MIAMI FL 33156**
 Mailing Address: **9100 S. DADELAND BLVD., SUITE 1700 MIAMI FL 33156 7817**

2. Principal Place of Business: **9000 S.W. 152 ST. Ste 106 MIAMI FL 33157**
 2a. Mailing Address: **9000 SW 152 ST Ste 106 MIAMI FL 33157**

3. Date Incorporated or Qualified: **04/30/1996**
 3a. Date of Last Report: **04/30/1996**
 4. FEI Number: **Applied for**
 5. Certificate of Status Desired: **Applied for**
 6. Election Campaign Financing Trust Fund Contribution:
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**BROWN, B. MACKAY ESQ.
 WHITE & BROWN, PROFESSIONAL ASSOCIATION
 7400 N. KENDALL DRIVE, SUITE 100
 MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name: **ROBERTO CHIANTERA**
 82 Street Address (P.O. Box Number is Not Acceptable): **9000 SW 152 ST. STE 102**
 83 City: **MIAMI**
 84 State: **FL**
 85 Zip Code: **33157**

11. Pursuant to the provisions of Sections 607.0509 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE	D	<input type="checkbox"/> DELETE
11.2 NAME	MELPIGNANO, SERGIO	
11.3 STREET ADDRESS	9100 S. DADELAND BLVD., SUITE 1700	
11.4 CITY - ST - ZIP	MIAMI FL 33156	
11.5 TITLE	D	<input type="checkbox"/> DELETE
11.6 NAME	MELPIGNANO, VITA MARIA	
11.7 STREET ADDRESS	9100 S. DADELAND BLVD., SUITE 1700	
11.8 CITY - ST - ZIP	MIAMI FL 33156	
11.9 TITLE	D	<input type="checkbox"/> DELETE
11.10 NAME	MELPIGNANO, CATALDO	
11.11 STREET ADDRESS	9100 S. DADELAND BLVD., SUITE 1700	
11.12 CITY - ST - ZIP	MIAMI FL 33156	
11.13 TITLE	D	<input type="checkbox"/> DELETE
11.14 NAME	CHIANTERA, ROBERTO	
11.15 STREET ADDRESS	9100 S. DADELAND BLVD., SUITE 1700	
11.16 CITY - ST - ZIP	MIAMI FL 33156	
11.17 TITLE		<input type="checkbox"/> DELETE
11.18 NAME		
11.19 STREET ADDRESS		
11.20 CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	all DIRECTORS:	
13.3 STREET ADDRESS	9000 S.W. 152 ST.	
13.4 CITY - ST - ZIP	SUITE 106	
13.5 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	MIAMI, FL 33157	
13.7 STREET ADDRESS		
13.8 CITY - ST - ZIP		
13.9 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY - ST - ZIP		
13.13 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY - ST - ZIP		
13.17 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 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 presented 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 in the attachment with an address.

SIGNATURE: **ROBERTO Chiantera** 3-4-97 305-278-8400
 Director

CR2E034 (9/96)