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

Mailing Address

NOTH MILNE & ROUSSO

MIAMI FL 33156-2945

9350 S. DIXIE HIGHWAY PH2

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

% ROTH MILNE & ROUSSO

8350 S. DIXIE HIGHWAY PH2

MIAMI FL 33156



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000039520 (7)

MANSUETO PRODUCCIONES CORPORATION

3a. Date of Last Report 3. Date Incorporated or Qualified 05/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Hoplied Not Applicable 26 Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 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 Country Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROTH, LEONARDO A 9350 SOUTH DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) PENTHOUSE TWO 83 **MIAMI FL 33156** City Zip Code 11. Pursuant to the provisions of Sections 607.0502/and 607.1508, Florida Statutes, the above pareed 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 far with, and accept the oblightions of, Section 607.0505/Florida statutes. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) DELETE PTD 1.1 TITLE Change ___ Addition TITLE MANSUETO, RITA CR2E034 1.2 NAME NAME TALCAHUANO 68, 211 STREET ADDRESS 1.3 STREET ADORESS **BUENOS AIRES, ARGENTINA 1013** CHY-S1 Zif 1.4 CITY-ST-ZIP SVD DELETE Change Addition TITLE 21 TITLE D'AMICO, MARCELA B 22 NAME NAME MOSCU 5143, CAPITAL FEDERAL 23 STREET ADDRESS STREET ADDRESS ARGENTINA 1427 2 4 City-SY-ZIP CHTY-ST DELETE (:hange Addition 3.1 TITLE THUE 3.2 NAME N/dME 3.3 STREET ADDRESS STREET ADDRESS

14. I do hereby corlify 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 efficer 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 flock 12 or Block 13 if changed, or on an attachment with an address.

34. CITY-ST-ZIP

4.3 STREET ADDRESS

53 STREET ADDRESS 54 City-St-Zip

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

51 TITLE

52 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

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Apr 24 1997 8:00am

Secretary of State