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NEW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
Apr 03 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>	 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Myrtham Secretary of State DIVISION OF CORPORATIONS</b>
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DOCUMENT # P96000059224 (1)

1. Corporation Name  
**KARTMAX CORP.**



Principal Place of Business <b>12328 SOUTHWEST 94TH TERRACE MIAMI FL 33186</b>	Mailing Address <b>12328 SOUTHWEST 94TH TERRACE MIAMI FL 33186-1862</b>
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3. Date Incorporated or Qualified <b>07/11/1996</b>	3a. Date of Last Report <b>N/A</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number <b>65-0696065</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

4 **MASTRANA, F R  
2750 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE FL 33306**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PRESIDENT</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CARL-PHILIPPE DENIS</b>	1.2 NAME	
STREET ADDRESS	<b>12328 SW 94TH TR.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33186</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VICE-PRESIDENT</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LUDOVICO MANFREDI</b>	2.2 NAME	
STREET ADDRESS	<b>1541 BRICKEN AVENUE, # 2305</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33129</b>	2.4 CITY-ST-ZIP	
TITLE	<b>TREASURER - SECRETARY</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NICOLAS TOPOL</b>	3.2 NAME	
STREET ADDRESS	<b>151 CRANDON BLVD, # 141</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI BEACH FL 33149</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

Bank Depo \$165.00

I 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is in Block 12 or Block 13 if checked, or on an attachment with an address.

CR2E034 (9/96)

SIGNATURE

NICOLAS TOPOL

11/21/97

12/21/97

1/3/98