

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

FILED

May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000061961 (4)**

1. Corporation Name
MEMPHIS INT'L CORP.

Principal Place of Business 7796 NW 71ST STREET MIAMI FL 33166	Mailing Address 7796 NW 71ST STREET MIAMI FL 33166-2346
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2. Principal Place of Business 21 8410 NW 70th STREET Suite, Apt. #, etc.		2a. Mailing Address 26 8410 NW 70th STREET Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/24/1996	3a. Date of Last Report
22 City & State 23 MIAMI, FL 24 Zip 33166 Country		27 City & State 28 MIAMI, FL 29 Zip 33166 Country		4. FEI Number 65-0686072	Applied For Not Applicable
25		30		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 MIAMI, FL		28 MIAMI, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 33166		29 33166		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

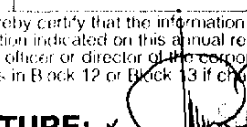
9. Name and Address of Current Registered Agent SILVA, LUIZ C 7796 NW 71ST STREET MIAMI FL 33166		10. Name and Address of New Registered Agent 81 Name LUIZ C. SILVA 82 Street Address (P.O. Box Number is Not Acceptable) 8410 NW 70th STREET 83 84 City MIAMI FL 85 Zip Code 33166	
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11. 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  DATE **04/08/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SILVA, LUIZ C 9731 SW 51 LANE MIAMI FL 33178	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	D/P/T SILVA, LUIZ C. 9731 NW 51 LANE MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALVES, CARLOS H 13391B SW 88 TERRACE MIAMI FL 33186	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	D/S SILVA, VILMA S. 9731 NW 51 LANE MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  DATE **04/08/97** (205) 5130096

CR2E034 (9/96)