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FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000063097 (5)
1. Corporation Name
SURVEYING EQUIPMENT RENTAL, INC.



Principal Place of Business: CALLE 21 NO. 78-H COL. ITZMNA X 14 Y AVENIDA ALEMAN MERIDA, YUCATAN 97100, MEX.

Mailing Address: CALLE 21 NO. 78-H COL. ITZMNA X 14 Y AVENIDA ALEMAN MERIDA, YUCATAN 97100, MEX.

3. Date Incorporated or Qualified: 07/29/1996
3a. Date of Last Report

4. FEI Number: 65-0701094
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business

21 7891 W FLAGLER ST
Suite, Apt. #, etc.

22 SUITE 296
City & State: MIAMI, FL.

23 MIAMI, FL.
Zip: 33144 Country: U.S.

2a. Mailing Address

26 7891 W FLAGLER ST
Suite, Apt. #, etc.

27 SUITE 296
City & State: MIAMI, FL.

28 MIAMI, FL.
Zip: 33144 Country: U.S.

9. Name and Address of Current Registered Agent

BERGER, JAMES L
100 NORTHEAST THIRD AVENUE
SUITE 400
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

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

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	D'ARGENCE, FRANCISCO M	
STREET ADDRESS	CALLE 21 NO. 78-H COL. ITZMNA X14Y AV AL	
CITY-ST-ZIP	MERIDA, YUCATAN 97100, MEX.	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	D'ARGENCE, FRANCISCO M	
1.3 STREET ADDRESS	7891 W. FLAGLER ST. SUITE 296	
1.4 CITY-ST-ZIP	MIAMI FL. 33144	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 as an attachment with an address.

SIGNATURE: [Signature] D'ARGENCE, FRANCISCO M. DATE: Apr 22, 1997 (305) 267-9040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0520661

CR2E034 (9/96)