


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

FILED

May 16 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 # P96000070016 (6) 1. Corporation Name SOUTH DATA CORPORATION		
Principal Place of Business 7730 SW 68 TR MIAMI FL 33143	Mailing Address 7730 SW 68 TR MIAMI FL 33143-2709	



2. Principal Place of Business 21 1620 NW 82 AV Suite, Apt. #, etc. 22 City & State 23 MIAMI FL Zip 24 33126		2a. Mailing Address 26 1620 NW 82 AVE Suite, Apt. #, etc. 27 City & State 28 MIAMI FL Zip 29 33126		3. Date Incorporated or Qualified 08/22/1996		3a. Date of Last Report	
5. Certificate of Status Desired <input type="checkbox"/>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		4. FEI Number 65-0693218		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		5. \$8.75 Additional Fee Required		7. \$5.00 May Be Added to Fees			

9. Name and Address of Current Registered Agent BALLESTAS, ACHILLES 7730 SW 68 TR MIAMI FL 33143				10. Name and Address of New Registered Agent 81 Name LUIS M. BIANCALANA 82 Street Address (P.O. Box Number is Not Acceptable) 83 1620 NW 82 AVE 84 City MIAMI FL 85 Zip Code 33126			
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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 *[Signature]* BIANCALANA, Luis M. 4/28/97
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	DEL RIO, RAYNALDO	<input type="checkbox"/> DELETE	1.1 TITLE	D	DEL RIO, RAYNALDO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12940 SW 122 AVENUE		1.2 NAME		1620 NW 82 AV	
STREET ADDRESS		MIAMI FL		1.3 STREET ADDRESS		MIAMI, FL 33126	
CITY-ST-ZIP				1.4 CITY-ST-ZIP			
TITLE	D	MURA, JORGE S	<input type="checkbox"/> DELETE	2.1 TITLE	D	MURA, JORGE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12940 SW 122 AVENUE		2.2 NAME		1620 NW 82 AV	
STREET ADDRESS		MIAMI FL		2.3 STREET ADDRESS		MIAMI, FL 33126	
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE	UP	BIANCALANA, Luis M	<input type="checkbox"/> DELETE	3.1 TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1620 NW 82 AVE		3.2 NAME			
STREET ADDRESS		MIAMI FL 33126		3.3 STREET ADDRESS			
CITY-ST-ZIP				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			

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 *[Signature]* BIANCALANA 4/28/97 305-4366288

CR2E034 (9/96)