

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

FILED

**Apr 30 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000085302 (3)
 1. Corporation Name
ORO MAGNIFICO INC.



Principal Place of Business 1428 BRICKELL AVE., SUITE 400 MIAMI FL 33131	Mailing Address 1428 BRICKELL AVE., SUITE 400 MIAMI FL 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2151 LeJeune Rd. Suite, Apt. #, etc. 22 Suite 307 City & State 23 Coral Gables, FL Zip 24 33134 Country 25 USA	2a. Mailing Address 26 2151 LeJeune Rd. Suite, Apt. #, etc. 27 Suite 307 City & State 28 Coral Gables, FL Zip 29 33134 Country 30 USA
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3. Date Incorporated or Qualified 10/14/1996	4. FEI Number 65-0711792	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
CUMMINGS, PAUL M
1428 BRICKELL AVE., SUITE 400
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name Giselle M. Viera
82 Street Address (P.O. Box Number is Not Acceptable) 2151 LeJeune Rd. Suite 307
83
84 City Coral Gables FL 85 Zip Code 33134

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]* (NOTE: Registered Agent signature required when reinstating) DATE **4-21-98**

12. OFFICERS AND DIRECTORS

TITLE VPD	<input checked="" type="checkbox"/> DELETE
NAME FIOR, DANILO	
STREET ADDRESS 9100 NW 38TH ST, SUITE 108	
CITY - ST - ZIP MIAMI FL 33178	
TITLE PTD	<input type="checkbox"/> DELETE
NAME PEREZ, LUIS	
STREET ADDRESS 9100 NW 38TH ST SUITE 108	
CITY - ST - ZIP MIAMI FL 33178	
TITLE SD	<input type="checkbox"/> DELETE
NAME ALVAREZ, CAMILO	
STREET ADDRESS 9100 NW 38TH ST, SUITE 108	
CITY - ST - ZIP MIAMI FL 33178	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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 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 reports 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]
Luis Perez
 Received 4/21/98 3:05 PM

CR2E034 (10/97)