FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 18 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 # P96000087914 (3)

1. Corporation Name
AMERITAL SCIENTIFIC, INC.

Principal Place of Business
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131

Mailing Address
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131-1700

3. Date Incorporated or Qualified: 10/24/1996
3a. Date of Last Report:
4. FEI Number: APPLIED FOR — [ ] 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 [X] No

2. Principal Place of Business
21 1 S.E. 3rd Ave
Suite, Apt #, etc.
22 Ste 960
City & State
23 Miami FLA
Zip
24 33131
Country
25 U.S.A.

2a. Mailing Address
26 1 S.E. 3rd Ave
Suite, Apt #, etc.
27 Ste 960
City & State
28 Miami FL
Zip
29 33131
Country
30 U.S.A.

9. Name and Address of Current Registered Agent
ROZENCWAIG, LESLIE ALAN
960 SUNTRUST INTERNATIONAL CENTER
1 SOUTHEAST 3RD AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name: Leslie Alan Rozencwaig
82 Street Address (P.O. Box Number is Not Acceptable): 1 S.E. 3rd Ave.
83 Suite 960
84 City: Miami
FL
85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 or 617.0502, 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] 3/3/97

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		[ ] DELETE	1 TITLE	PRESIDENT	[ ] Change [X] Addition
NAME			12 NAME	ROLANDO RICCIO	
STREET ADDRESS			13 STREET ADDRESS	c/o 1 S.E. 3rd AVE. STE 960	
CITY-ST-ZIP			14 CITY-ST-ZIP	MIAMI FLA 33131	
TITLE		[ ] DELETE	2 TITLE	SECRETARY	[ ] Change [X] Addition
NAME			22 NAME	LESLIE ALAN ROZENCWAIG	
STREET ADDRESS			23 STREET ADDRESS	1 S.E. 3RD AVE. STE. 960	
CITY-ST-ZIP			24 CITY-ST-ZIP	MIAMI, FLA 33131	
TITLE		[ ] DELETE	3 TITLE		[ ] Change [ ] Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		[ ] DELETE	4 TITLE		[ ] Change [ ] Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		[ ] DELETE	5 TITLE		[ ] Change [ ] Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		[ ] DELETE	6 TITLE		[ ] Change [ ] Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (9/96)

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]