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Jun 03 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 # P96000089609 (7)

1. Corporation Name
CONDOOR, INC.



Principal Place of Business
717 PONCE DE LEON BLVD.
SUITE 234
CORAL GABLES FL 33134

Mailing Address
717 PONCE DE LEON BLVD.
SUITE 234
CORAL GABLES FL 33134-2048

3. Date Incorporated or Qualified
10/31/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FABRE, FRANK R ESQ.
717 PONCE DE LEON BLVD.
SUITE 234
CORAL GABLES FL 33134

81 Name

MANUEL FEIJOO

82 Street Address (P.O. Box Number is Not Acceptable)

7190 CORAL WAY

83

MIAMI, FLORIDA 33155

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

MANUEL FEIJOO

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5-29-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PO
FEIJOO, MANUEL SR.
7190 CORAL WAY
MIAMI FL 33155

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
EQUARAS, GUSTAVO
7190 CORAL WAY
MIAMI FL 33155

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
FEIJOO, MANUEL I JR.
7190 CORAL WAY
MIAMI FL 33155

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
FABRE, FRANK R
717 PONCE DE LEON BLVD.
CORAL GABLES FL 33134

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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.

MANUEL FEIJOO

4-23-1997

305-266-2296

CR2E034 (9/96)