

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

FILED

Jan 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000096141 (2)**

1. Corporation Name  
**INFUSTAT INC.**



Principal Place of Business <b>1840 CORAL WAY 203 MIAMI FL 33145 US</b>	Mailing Address <b>2445 S.W. 28 STREET COCONUT GROVE FL 33133</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 4040 Aurora Street</b>		2a. Mailing Address <b>26 4040 Aurora Street</b>		3. Date Incorporated or Qualified <b>11/20/1996</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>65-0725242</b>	
22		27		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State <b>23 Coral Gables, Florida</b>		City & State <b>28 Coral Gables, Florida</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>24 33146</b>		Country <b>25 U.S.</b>		7. 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

**TELLECHEA, ALBERT  
2445 S.W. 28 STREET  
COCONUT GROVE FL 33133**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) <b>1834 SW 94 Court</b>
83
84 City <b>Miami</b>
85 Zip Code <b>FL 33165</b>

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 *Albert Tellechea* **Albert Tellechea President 1/15/98**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P TELLECHEA, ALBERT 2445 SW 28 ST VP	1.1 TITLE	P Tellechea, Albert
NAME	BRIZUELA, GERMAN	1.2 NAME	1834 SW 94 Court
STREET ADDRESS	4650 SW 154 COURT	1.3 STREET ADDRESS	MIAMI FL 33165
CITY-ST-ZIP	MIAMI FL	2.1 TITLE	V/SIT
TITLE	ST RIVERA, EDWIN JR	2.2 NAME	Rivera, Edwin Jr
NAME	10800 SW 63 ST	2.3 STREET ADDRESS	10800 SW 63 Street
STREET ADDRESS	MIAMI FL	2.4 CITY-ST-ZIP	Miami FL 33173
CITY-ST-ZIP		3.1 TITLE	
TITLE		3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY-ST-ZIP	
CITY-ST-ZIP		4.1 TITLE	
TITLE		4.2 NAME	
NAME		4.3 STREET ADDRESS	
STREET ADDRESS		4.4 CITY-ST-ZIP	
CITY-ST-ZIP		5.1 TITLE	
TITLE		5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	
TITLE		6.2 NAME	
NAME		6.3 STREET ADDRESS	
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 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: *Albert Tellechea* **Albert Tellechea President 1/15/98 (305) 444-0480**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)