

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

FILED
Feb 24 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 # P97000083612 (6)
1. Corporation Name
MATIST HOLDINGS, INC.



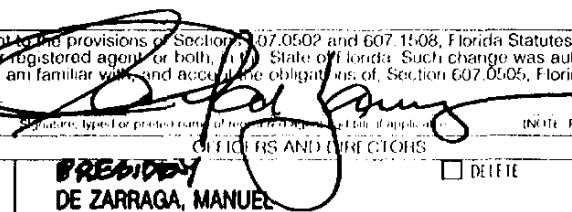
Principal Place of Business 80 S.W. 8TH STREET SUITE 2550 MIAMI FL 33130	Mailing Address 80 S.W. 8TH STREET SUITE 2550 MIAMI FL 33130
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 616 SAN ESTEBAN Suite, Apt. #, etc. 22 City & State 23 CORAL GABLES, FL Zip 24 33146 Country 25	2a. Mailing Address 26 616 SAN ESTEBAN Suite, Apt. #, etc. 27 City & State 28 CORAL GABLES FL Zip 29 33146 Country 30	3. Date Incorporated or Qualified 09/25/1997 4. FEI Number 65-0792392 Applied For <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> 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
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9. Name and Address of Current Registered Agent RODRIGUEZ, JUAN E 80 S.W. 8TH STREET SUITE 2550 MIAMI FL 33130	10. Name and Address of New Registered Agent 81 Name MANUEL DE ZARRAGA 82 Street Address (P.O. Box Number is Not Acceptable) 616 SAN ESTEBAN 83 84 City CORAL GABLES FL 85 Zip Code 33146
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11. Pursuant to the provisions of Section 607.0502 and 607.1108, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent for 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  DATE 2/13/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT DE ZARRAGA, MANUEL 80 S.W. 8TH STREET MIAMI FL 33130 <input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT - 616 SAN ESTEBAN CORAL GABLES FL 33146 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DE ZARRAGA, MARLENE <input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DE ZARRAGA, MARLENE 616 SAN ESTEBAN CORAL GABLES, FL 33146 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VICE PRES.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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  DATE 1/7/98 758-6522

CR2E034 (10/97)