

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

FILED
Apr 10 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 # P97000093360 (0)
 1. Corporation Name
NEW AMERICAN BUSINESS, INC.

Principal Place of Business 101 MADEIRA AVE. CORAL GABLES FL 33134	Mailing Address 101 MADEIRA AVE. CORAL GABLES FL 33134
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		3. Date Incorporated or Qualified	
21		26		65-0800933		10/30/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Applied For	
22		27		<input type="checkbox"/>		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28		<input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Country		Country		30		30	
25		30		33139		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ARAZOZA COMAS DE TORRES FERNANDEZ FRAGA 101 MADEIRA AVE. CORAL GABLES FL 33134				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
	PD Guillermo Botana	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	100 Lincoln Road Apt 1516		
	Miami Beach, FL 33139		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		
	<input type="checkbox"/> DELETE		

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: *[Signature]* Date: *04/06/98*

CR2E034 (10/97)