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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S17567

(6)

OLLA USA, INC.

FILED

Apr 21 1997 8:00am

Secretary of State

Principal Place	ing Address				I TO DITE TO STOLL	T DE DIABLE DEL SIGNI FORMA BILLE DIALI DODI DIDIL BIDIL BIDIS DIDIL BIDIL BIDIL					
8350 SUNSET DR.			8350 SUNSET DR.								
MIAMI FL 9314	3	MIAN	AI FL 33143-3832								
two w							3. Date Incorporate	d or Qualified	20 Do	te of Last R	oport
							12/11/1990	d or Quarried		10/1996	ероп
2. Principal Place of Business			2a. Mailing Address				4, FEI Number			Ar	plied For
21			26				65-0330212			· · · · · · · · · · · ·	ot Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Sta	tus Desired		\$8.75	
City & State	Δ	27	City & State							Fee Re	
23			├ ¬ '				6. Election Campai	- •		\$5.00	
Zip	Country	28	/ip	Co	untry	,	Trust Fund Contr			Added	
24	25	29	Ψ.	30	O11(1)		This corporation Florida Statutes			tax under s ∃No	. 199.032,
9, Name and Address of Current						10. Name and Address of New Registered Agent					
WAY	/NE, ROBERT	-			81	Name					
	5 SW 87 AVE.				_	8					
	MI FL 33174				62	Street A	Address (P.O. Box Number	s Not Acceptabl	θ)		
				•	B3						
					84	City			FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607	.1508, Florida St	atutes, the a	bove	e-named	corporation submits this sta	tement for the pi	ironse of	changing it	s registered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida	Such change w	as authorize	ed by	the corp	oration's board of directors	I hereby accep	the app	oiritment as	registered
SIGNATURE	in rannial with, and accept the oblig	ations ut, s	3000, (00 11011093	o, Flutida Sia	uules	s.					
	Signature, typed or printed name of registered ag					nt signature	required when reinstating)		DATE		
12.	OFFICERS AN	D DIRECT		13.			ADDITIONS/CHAI	NGES TO OFFIC	ERS AND		
TITLE "	NATONEK, RAOUL		DELFTE	1.1 T						Change	☐ Addition
NAME	OARA OLINIOET DD		12 N								1
STREET ADDRESS	AMAAN CI				13 STREET ADDRESS						
CITY-ST-ZIP	D				14 CITY - ST - ZIP			··· ·· ·· ·· ·· ·· · · · · · · · · · ·		<u> </u>	1 4 4 4 7 7
TITLE	NATONEK, STEFANO		DELETE 211							[_] Change	☐ Addition
NAME	8350 SUNSET DR.			22 N							
STREET ADDRESS	MIAMI FL				23 STREET ADDRESS						
CITY-ST-ZIP	S		☐ D£LE1E			ST - ZiP				F 1 (0)	1
TITLE	NATONEK, MARIA VITTORIA		LJ DELETE	31 T						Change	Addition
NAME	8350 SUNSET DR.			32 N							
STREET ADDRESS	MIAMI FL					ADDRESS					
CiTY-ST-ZIP	INDIAN I C		DELETE			ST - ZIP				Chanco	Addition
TITLE NAME			☐ DELETE	411						☐ Change	☐ Addition
STREET ADDRESS					NAME	1000000					
*,						ADDRESS					
CITY-ST-ZIP TITLE			☐ DELETE		HY-S	ST-ZIP				☐ Change	Addition
NAME				511						LT CHAILUS	☐ Addition
1				52 N		ADDDICE					
STREET ADDRESS	-					ADDRESS					
CITY-ST-ZIP TITLE			DELETE	611	HTY-S	1-ZIP				Change	Addition
NAME			L. DULUTE	62 N						FT change	F""1 VICORION
!						ADDOGGO					
STREET ADORESS						ADDRESS					
CITY-ST-ZIP			·	640	HTY-S	I - ZIP					

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name