FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S21995

1. Corporation Name

WAND AMERICAS, INC.

Principal Place of Business	Mailing Address
6619 S.Dixie Highway Suite 334 Miami, Fl 33143	6619 S.Dixie Highway Suite 334 Miami, Fl 33143

2. Principal Place of Business	2a. Mailing Address
21 6619 S.Dixie Highway	26 6619 S.Dixie Highway
Suite, Apt # etc 22 Suite 334	Suite, Apt # etc 27 Suite 334
City & State 23 Miami, Fl	City & State 28 Miami, Fl
Zip 24 33143 — Country 25	Zip 29 33143 — Country 30

3. Date Incorporated or Qualified: 01/02/1991
3a. Date of Last Report: 01/12/1995
4. FEI Number: 65-0236243 [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SHARP, WILLIAM M.
TWO URBAN CENTRE, SUITE 255
4890 W. KENNEDY BLVD
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name: A. Stephen Nemazie
82 Street Address (P.O. Box Number is Not Acceptable): 9200 S. Dadeland Blvd.
83 Suite 214
84 City: Miami FL 85 Zip Code: 33156

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: A. Stephen Nemazie — March 8, 1996
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent's signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/T/S [ ] DELETE	1.1 TITLE	P/T/S [ ] Change [ ] Addition
NAME	NEMAZIE, A. STEPHEN	1.2 NAME	NEMAZIE, A. STEPHEN
STREET ADDRESS	9200 S. Dadeland Blvd., #214	1.3 STREET ADDRESS	9200 S. Dadeland Blvd., #214
CITY-ST-ZIP	Miami, Fl 33156	1.4 CITY-ST-ZIP	Miami, Fl 33156
TITLE	[ ] DELETE	2.1 TITLE	[ ] Change [ ] Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME		4.2 NAME	000001765940
STREET ADDRESS		4.3 STREET ADDRESS	-04/02/96--01028--001
CITY-ST-ZIP		4.4 CITY-ST-ZIP	***200.00
TITLE	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	4-1-96

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: A. Stephen Nemazie, President — March 8, 1996 — (305) 670-0445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #