

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

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**Mar 21 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **S61857** (6)  
1. Corporation Name  
**LEXUS 300 CORPORATION**



Principal Place of Business: **G/O RIDDOBIL-FLORIDA, INC. 8750 NW 35TH ST. SUITE 200 MIAMI FL 33178 US**  
Mailing Address: **G/O RIDDOBIL-FLORIDA, INC. 8750 NW 36TH ST. SUITE 200 MIAMI FL 33178-2402 US**

3. Date Incorporated or Qualified: **06/20/1991**  
3a. Date of Last Report: **03/29/1996**  
4. FEI Number: **65-0302256**  
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

2. Principal Place of Business:  
21. **% SUTERRA CORPORATION**  
22. Suite Apt. #, etc.: **8750 NW 36 ST SUITE 200**  
23. City & State: **MIAMI FLORIDA**  
24. Zip: **33178** 25. Country: **USA**  
26. Mailing Address:  
26. **% SUTERRA CORPORATION**  
27. Suite, Apt. #, etc.: **8750 NW 36 ST SUITE 200**  
28. City & State: **MIAMI FLORIDA**  
29. Zip: **33178** 30. Country: **USA**

9. Name and Address of Current Registered Agent

**DEL VALLE, MILLY  
%SUTERRA CORPORATION  
8750 N.W. 36TH ST., SUITE 200  
MIAMI FL 33178**

10. Name and Address of New Registered Agent

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City: **FL** 85. Zip Code

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: *Milly Del Valle* DATE: **MARCH 11, 1997**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

|   |                                      |
|---|--------------------------------------|
| TITLE: <input checked="" type="checkbox"/> DELETE | NAME: <b>DAVIDSON, FERGUS M. JR.</b> |
| STREET ADDRESS: <b>8750 NW 36TH ST, SUITE 200</b> | CITY - ST - ZIP: <b>MIAMI FL</b>     |
| TITLE: <input type="checkbox"/> DELETE            | NAME:                                |
| STREET ADDRESS:                                   | CITY - ST - ZIP:                     |
| TITLE: <input type="checkbox"/> DELETE            | NAME:                                |
| STREET ADDRESS:                                   | CITY - ST - ZIP:                     |
| TITLE: <input type="checkbox"/> DELETE            | NAME:                                |
| STREET ADDRESS:                                   | CITY - ST - ZIP:                     |
| TITLE: <input type="checkbox"/> DELETE            | NAME:                                |
| STREET ADDRESS:                                   | CITY - ST - ZIP:                     |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|  |              |
|--|--------------|
| 1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | <b>V/T/S</b> |
| 1.2 NAME: <b>DEL VALLE MILLY</b>   |              |
| 1.3 STREET ADDRESS: <b>8750 NW 36 ST SUITE 200</b>                           |              |
| 1.4 CITY - ST - ZIP: <b>MIAMI FL 33178</b>                                   |              |
| 2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |              |
| 2.2 NAME:  |              |
| 2.3 STREET ADDRESS:  |              |
| 2.4 CITY - ST - ZIP:   |              |
| 3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |              |
| 3.2 NAME:  |              |
| 3.3 STREET ADDRESS:  |              |
| 3.4 CITY - ST - ZIP:   |              |
| 4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |              |
| 4.2 NAME:  |              |
| 4.3 STREET ADDRESS:  |              |
| 4.4 CITY - ST - ZIP:   |              |
| 5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |              |
| 5.2 NAME:  |              |
| 5.3 STREET ADDRESS:  |              |
| 5.4 CITY - ST - ZIP:   |              |
| 6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |              |
| 6.2 NAME:  |              |
| 6.3 STREET ADDRESS:  |              |
| 6.4 CITY - ST - ZIP:   |              |

14. 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 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: *Milly Del Valle* DATE: **MARCH 11, 1997 (305) 592-5999**  
SIGNATURE AND TYPE OF OFFICIAL: **Milly Del Valle**

CR2E034 (9/96)