

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

FILED
Apr 01 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 # S89109 (0)
1. Corporation Name
CAPATARA U.S., INC.

Principal Place of Business 877 EXECUTIVE CENTER DR., W. STE. 303 ST. PETERSBURG FL 33702 US	Mailing Address 877 EXECUTIVE CENTER DR., W. STE. 303 ST. PETERSBURG FL 33702 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/23/1991	4. FEI Number 59-3091449	Applied For <input type="checkbox"/> Not Applicable
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
MASCARA, ERNEST L.
877 EXECUTIVE CENTER DR., W.
GLADES BUILDING, STE. 303
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	DPS <input type="checkbox"/> DELETE
NAME	ANNING, RAY
STREET ADDRESS	40 LESLEY LANE
CITY-ST-ZIP	OLDSMAR FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	ANNING, TERRY
STREET ADDRESS	40 LESLEY LANE
CITY-ST-ZIP	OLDSMAR FL
TITLE	OT <input type="checkbox"/> DELETE
NAME	ANNING, PATRICIA
STREET ADDRESS	40 LESLEY LANE
CITY-ST-ZIP	OLDSMAR FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	ANNING, PATRICIA
STREET ADDRESS	1000 FORESTEDGE BLVD
CITY-ST-ZIP	OLDSMAR FL
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
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	TERRY ANNING
2.3 STREET ADDRESS	R.R. #3, 7786 PATTERSON SIDEROAD
2.4 CITY-ST-ZIP	CALEDON, EAST, ONTARIO L0N1E0
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	PATRICIA ANNING
4.3 STREET ADDRESS	R.R. #1, 22ND SIDEROAD
4.4 CITY-ST-ZIP	GEORGETOWN, ONTARIO. L7G4S4
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 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 my attachment with an address.

SIGNATURE:  RAY ANNING 3-17-98 789-7434

CR2E034 (10/97)