

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

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**Apr 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V34069 (7)

1. Corporation Name
PODER HOLDINGS INTERNATIONAL, INC.



Principal Place of Business 2937 SW 27 AVE 201 MIAMI FL 33133 US	Mailing Address 2937 SW 27 AVE 201 MIAMI FL 33133-3772 US
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3. Date Incorporated or Qualified 05/06/1992	3a. Date of Last Report 05/01/1996
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21. Principal Place of Business 8884 SW 129 Terrace	2a. Mailing Address 8884 SW 129 Terrace
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State Miami - FL	28. City & State FL - Miami
24. Zip 33176	25. Country USA
29. Zip 33176	30. Country USA

4. FEI Number 65-0334414	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ALBORNOZ, WILLIAM H.
 901 PONCE DE LEON BOULEVARD 701
 SUITE 510
 CORAL GABLES FL 33134**

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

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 PDS	NAME MACHADO, MARCOS	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS 2937 SW 27 AVE #201	CITY-ST-ZIP MIAMI FL	
TITLE V	NAME MARINI, LINO D	<input type="checkbox"/> DELETE
STREET ADDRESS 2937 SW 27 AVE #201	CITY-ST-ZIP MIAMI FL	
TITLE DT	NAME MARINI, OTTORINO	<input type="checkbox"/> DELETE
STREET ADDRESS 2937 SW 27 AVE #201	CITY-ST-ZIP MIAMI FL	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> DELETE
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PRESIDENT
2.3 STREET ADDRESS	MARINI, LINO D
2.4 CITY-ST-ZIP	8884 SW 129 TERRACE
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DT
3.3 STREET ADDRESS	MARINI, OTTORINO
3.4 CITY-ST-ZIP	8884 SW 129 TERRACE
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: _____ DATE: **04/21/97** (305)971-2999

CR2E034 (9/96)