

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

FILED

**Mar 04 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 # F93000004307 (5)
1. Corporation Name
DUNBAR INVESTMENTS N.V. CORP.



Principal Place of Business: % ORION INVESTMENT & MGMT. LTD. CORP. 9100 S. DADELAND BLVD., #1810 MIAMI FL 33156
Mailing Address: % ORION INVESTMENT & MGMT. LTD. CORP. 9100 S. DADELAND BLVD., #1810 MIAMI FL 33156-7814

3. Date Incorporated or Qualified: **09/22/1993**
3a. Date of Last Report: **03/28/1996**

2. Principal Place of Business
21. **Orion Inv. & Mgmt Corp**
22. **9000 SW 152nd #106**
23. **Miami, FL**
24. **33157** 25. **USA**

2a. Mailing Address
26. **Orion Inv. & Mgmt Corp**
27. **9000 SW 152nd #106**
28. **Miami, FL**
29. **33157** 30. **USA**

4. FEI Number: **59-2010725**
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
**SANZ, JOSEPH A
ORION INV. & MGMT. LTD. CORP.
9100 S. DADELAND BLVD., #1810
MIAMI FL 33156**

10. Name and Address of New Registered Agent
81. Name: **SANZ, JOSEPH A.**
82. Street Address (P.O. Box Number is Not Acceptable): **ORION INV & MGMT CORP
9000 SW 152nd St #106**
84. City: **MIAMI** 85. Zip Code: **FL 33157**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P PERUCCHI, FIORENZO	1.2 NAME	
STREET ADDRESS	9100 S. DADELAND BLVD., #1800	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPT SANZ, JOSEPH A	2.2 NAME	
STREET ADDRESS	9100 S. DADELAND BLVD., #1800	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: **2/27/97** DAYTIME PHONE: **305-278-8400**

CR2E034 (9/96)