

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 # **820927** (2)

1. Corporation Name
OMC LATIN AMERICA/CARIBBEAN, INC.



Principal Place of Business Mailing Address
100 SEA HORSE DRIVE WAUKEGAN ILLINOIS 60085-9195

3. Date Incorporated or Qualified **11/29/1967** 3a. Date of Last Report **05/01/1995**
4. FET Number **36-2536154** 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 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

Signature typed on previous page of this report and the date of filing. (Name of Registered Agent also required when filing change.) DATE

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	BADDELEY, D J	
STREET ADDRESS	100 SEA HORSE DR	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	BOWMAN, H.W.	
STREET ADDRESS	100 SEA-HORSE DRIVE	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	CARTADE, R M	
STREET ADDRESS	403 SAWGRASS COP PKWY	
CITY-ST-ZIP	SUNRISE FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	JENSEN, R.J.	
STREET ADDRESS	100 SEA HORSE DR	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	MALOVANY, H.	
STREET ADDRESS	100 SEAHORSE DR	
CITY-ST-ZIP	WAUKEGAN IL	
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	
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	

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5/1/96

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: *H. Malovany*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
H. Malovany, Secretary

4/29/96 **847-689-6200**
DATE DAY/TIME PHONE #

CR2E034 (12/95)