

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

0195942

PROFIT CORPORATION ANNUAL REPORT 1999



FLOIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **V07535**
 1. Corporation Name
MAPISAMERICA, INC.

Principal Place of Business: **ALFA 228 PEDREGAL DE SAN FRANCISCO COYOACAN 04320 MEXICO, D.F.**
 Mailing Address: **C/O G. FRANK QUESADA, ESO. 1313 PONCE DE LEON BLVD., SUITE 200 CORAL GABLES FL 33134**

21	2a	26	27	28	29	30
Principal Place of Business	Mailing Address	Suite, Apt. #, etc	City & State	Zip	Country	Country
22	23	24	25	26	27	28
Suite, Apt. #, etc	City & State	Zip	Country	Zip	Country	Country

9. Name and Address of Current Registered Agent
QUESADA, G. FRANK
1313 PONCE DE LEON BLVD
STE 200
CORAL GABLES FL 33134

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 or printed name of registered agent and title if agent only

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	[] Change [] Addition
NAME	GUTERREZ, FRANCISCO M	12 NAME	
STREET ADDRESS	ALFA 228 PEDREGAL DE SANFRANCISCO	13 STREET ADDRESS	
CITY-ST-ZIP	COYOACAN 04320 MEXICO, D.F.	14 CITY-ST-ZIP	
TITLE	VSD	21 TITLE	[] Change [] Addition
NAME	GALLEGOS, PALMIDYA M	22 NAME	
STREET ADDRESS	ALFA 228 PEDREGAL DE SAN FRANCISCO	23 STREET ADDRESS	
CITY-ST-ZIP	COYOACAN 04320, MEXICO, D.F.	24 CITY-ST-ZIP	
TITLE		31 TITLE	[] Change [] Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	[] Change [] Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	[] Change [] Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	[] Change [] Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(f), 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, with all other like empowered

SIGNATURE: Palmidya
 PALMIDYA MONTERO GALLEGOS

FILED
 93 MAR 22 PM 12:10
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/17/1992**

4. FEI Number: **65-0392664**
 Applied For
 Not Applicable

5. Certificate of States Desired: []
\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: []
\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax: [] Yes [] No

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

300010281241431-5
 -03/30/99-01088-004
 ****150.00 ****150.00

CR2E034 (**98)