2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M85194

FILED Apr 28, 2009 Secretary of State

Entity Name: INTERAMERICAN SERVICE UNLIMITED CORP.

Current Principal Place of Business:		New Principal Place of Business:		
205 COR 04	P CENTER D	R		
IIAMI, FL	33126			
urrent N	lailing Addre	ss:	New Mailing Addres	ss:
	P CENTER D	R		
04 1IAMI, FL	33126			
El Number	: 65-0055297	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
	REGISTERED . REMO AVE	AGENTS INC		
	ABLES, FL 33	146 US		
ORAL G	ABLES, FL 33 named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both
ORAL G	named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both
ORAL G he above the State	e named entity e of Florida. RE:			ed office or registered agent, or both Date
ORAL G he above the State	e named entity e of Florida. RE: Electro	submits this statement for the բ		
iORAL G. he above the State GNATU	e named entity e of Florida. RE: Electro	submits this statement for the pair of the pair of Registered Agragature of Registered Agragature fund Contribution ().	ent	
ORAL G. he above the State IGNATU	e named entity e of Florida. RE: Electron mpaign Financin S AND DIREC	submits this statement for the price Signature of Registered Agrig Trust Fund Contribution (). STORS:) Delete I R ENTER DR	ent	Date
he above the State IGNATUI Jection Car OFFICER tte: ame: ddress:	e named entity e of Florida. RE: Electrol mpaign Financin S AND DIREC DPS (MOLINA, JUAN 7205 CORP CI MIAMI, FL 331	submits this statement for the particle Signature of Registered Agray Trust Fund Contribution (). STORS:) Delete ENTER DR 26) Delete EACELY ENTER DR	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELVIRA VERA GM 04/28/2009