2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000084214

Entity Name: INTERAMERICAN MARKETING SOLUTIONS, INC.

FILED Apr 07, 2006 Secretary of State

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1320 S DIXIE HWY 9350 SOUTH DIXIE HIGHWAY

PH 1250 SUITE 1400

CORAL GABLES, FL 33146 US MIAMI, FL 33156 US

Current Mailing Address: New Mailing Address:

1320 S DIXIE HWY 9350 SOUTH DIXIE HIGHWAY

PH 1250 SUITE 1400

CORAL GABLES, FL 33146 US MIAMI, FL 33156 US

FEI Number: 65-0453405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FIGUERAS, SILVIA T FIGUERAS, SILVIA J 9350 S DIXIE HWY 9350 S DIXIE HWY STE 1400 STE 1400 MIAMI, FL 33156 US MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

in the State of Florida.

SIGNATURE: SILVIA FIGUERAS 04/07/2006

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: FIGUERAS, MAURICIO Name: FIGUERAS, MAURICIO
Address: 1320 S DIXIE HWY #250 Address: 9350 SOUTH DIXIE HIGHWAY - SUITE 1400

City-St-Zip: CORAL GABLES, FL 33146 US City-St-Zip: MIAMI, FL 33156 US

Title: TD () Delete Title: TD (X) Change () Addition Name: FIGUERAS, SYLVIA Name: FIGUERAS, SYLVIA J

Address: 1320 S DIXIE HWY #1250 Address: 9350 SOUTH DIXIE HIGHWAY - SUITE 1400

City-St-Zip: CORAL GABLES, FL 33146 US City-St-Zip: MIAMI, FL 33156 US

Title: SD () Delete Title: SD (X) Change () Addition Name: FIGUERAS, LUIS G Name: FIGUERAS, LUIS G

Address: 1320 S DIXIE HWY PH #1250 Address: 9350 SOUTH DIXIE HIGHWAY - SUITE 1400

City-St-Zip: CORAL GABLES, FL 33146 US City-St-Zip: MIAMI, FL 33156 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MAURICIO FIGUERAS PD 04/07/2006