

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 2:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # G91833 (5)

1. Corporation Name

IBC FIDUCIARY INC.

Principal Place of Business

**100 SE 2ND ST.
SUITE 2315A
MIAMI FL 33131**

Mailing Address

**100 S.E. 2nd St.
SUITE 2315A
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/19/1984

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2398374

Applied For
☐ Not Application

2. Principal Place of Business

21

2a. Mailing Address

26

100 S.E. 2nd St.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

State of Florida

22

Suite Apt # etc

27

#2315-A

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

City & State

23

City & State

28

Miami, FL

8. This corporation has liability for intangible tax under S. 199.07C
Florida Statutes ☐ Yes ☒ No

24

Country

25

Zip

29

33131

Country

30

U.S.A.

9. Name and Address of Current Registered Agent

**SMEJDA, L.
100 SE 2ND ST.
SUITE 2315-A
MIAMI FL 33131**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 199.07C and 199.07D, Florida Statutes, the above named corporation submits this statement for the purpose of electing its registered office and registered agent, or parts in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the compliance of the following Florida Statutes:

SIGNATURE

Signature of Current Registered Agent (Print Name and Title)

Signature of New Registered Agent (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME

PD

**KANSY, JOSEPH
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

P-D

**KANSY, J.
444 Brickell Ave. 51-246
Miami FL**

NAME

S

**SMEJDA, L.
444 BRICKELL AVE 51-246
MIAMI FL 33131**

NAME

S-VP-D

**SMEJDA, L.
444 Brickell Ave. 51-246
Miami FL**

NAME

AS

**HENLEY, J.
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

AS

**HENLEY, J.
444 Brickell Ave. 51-246
Miami FL**

NAME

AS

**MAXFIELD, P.
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

AS

**MAXFIELD, P.
444 Brickell Ave. 51-246
Miami FL**

NAME

X

**HENLEY, J.
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

X

**HENLEY, J.
444 Brickell Ave. 51-246
Miami FL**

NAME

AS

**MAXFIELD, P.
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

AS

**MAXFIELD, P.
444 Brickell Ave. 51-246
Miami FL**

NAME

AS

**MAXFIELD, P.
444 BRICKELL AVE 51-246
MIAMI FL**

NAME

AS

**MAXFIELD, P.
444 Brickell Ave. 51-246
Miami FL**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L. Smejda 4/28/95 305-358-9990