

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jun 09, 1999 8:00 am
Secretary of State

06-09-1999 90016 007 ***558.75

DOCUMENT # G46037

1. Corporation Name

INTERNATIONAL FINANCE BANK

Principal Place of Business

MAIN OFFICE
1432 BRICKELL AVENUE
MIAMI FL 33131

Mailing Address

P.O. BOX 441900
MIAMI FL 33144
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1983

4. FEI Number

59-2327185

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 owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 1432 BRICKELL AV

27 Suite, Apt. #, etc.

27 MIAMI FL

28 City & State

28 33131

29 Zip

30 Country

USA

9. Name and Address of Current Registered Agent

RUDD, MARIA
1432 BRICKELL AVENUE
MIAMI FL 33131

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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME GRANJA, SANTIAGO
STREET ADDRESS 206 NE 2ND AVENUE
CITY-ST-ZIP DANIA FL 33004

TITLE COOD ☐ DELETE

NAME GOMEZ, RUBEN D
STREET ADDRESS 888 BRICKELL KEY DRIVE, APT. 907
CITY-ST-ZIP MIAMI FL 33131

TITLE EVP ☒ DELETE

NAME BRITTI, ELISEO
STREET ADDRESS 7045 S.W. 107TH TERRACE
CITY-ST-ZIP MIAMI FL 33156

TITLE VP ☐ DELETE

NAME HARDUVEL, T. GEORGE
STREET ADDRESS 8980 S.W. 56TH TERRACE
CITY-ST-ZIP MIAMI FL 33173

TITLE VPT ☐ DELETE

NAME CALLAZO, MANUEL E JR.
STREET ADDRESS 8533 S.W. 5TH STREET, #205
CITY-ST-ZIP PEMBROKE PINES FL 33025

TITLE VP ☒ DELETE

NAME HERNANDEZ, DARIO
STREET ADDRESS 1910 S.W. 125TH COURT
CITY-ST-ZIP MIAMI FL 33173

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/CEO/D ☒ Change ☐ Addition

1.2 NAME Ruben D. Gomez
1.3 STREET ADDRESS 888 Brickell Key Dr. #2407
1.4 CITY-ST-ZIP Miami, Florida 33131

2.1 TITLE EVP ☐ Change ☒ Addition

2.2 NAME Nelson Alvarado
2.3 STREET ADDRESS 9215 S.W. 71 Ave.
2.4 CITY-ST-ZIP Pinecrest, Florida 33156

3.1 TITLE SVP/CIO/ Treasurer ☒ Change ☐ Addition

3.2 NAME Manuel E. Collazo, Jr.
3.3 STREET ADDRESS 1918 N.W. 171 Ave.
3.4 CITY-ST-ZIP Pembroke Pines, FL. 33028

4.1 TITLE SVP/COO ☒ Change ☐ Addition

4.2 NAME Santiago Granja
4.3 STREET ADDRESS 206 NE 2nd Ave.
4.4 CITY-ST-ZIP Dania, Florida 33004

5.1 TITLE VP/Financial Comptroller ☐ Change ☒ Addition

5.2 NAME Christine Gonzalez
5.3 STREET ADDRESS 3900 S.W. 60th Ave.
5.4 CITY-ST-ZIP Miami, Florida 33155

6.1 TITLE VP/Sr. Domestic Lending Officer ☒ Change ☐ Addition

6.2 NAME T. George Harduvel
6.3 STREET ADDRESS 8980 S.W. 56 Terr.
6.4 CITY-ST-ZIP Miami, FL. 33173

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement to 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/99

Date

305 374 5959

Daytime Phone #

CR2E034 (1/198)

0215994