

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G46037**

1. Entity Name  
**INTERNATIONAL FINANCE BANK**

**FILED**  
**Sep 13, 2000 8:00 am**  
**Secretary of State**

09-13-2000 90024 028 \*\*\*558.75

Principal Place of Business

**MAIN OFFICE**  
**1432 BRICKELL AVENUE**  
**MIAMI FL 33131**

Mailing Address

**1432 BRICKELL AVE.**  
**MIAMI FL 33131**  
**US**

2. Principal Place of Business

**888 Brickell Avenue**

3. Mailing Address

**888 Brickell Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Miami, Florida**

City & State  
**Miami, Florida**

4. FEI Number **59-2327185**

Applied For  
Not Applicable

Zip  
**33131-2913**

Country  
**USA**

Zip  
**33131-2913**

Country  
**USA**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RUDD, MARIA**  
**1432 BRICKELL AVENUE**  
**MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **Felix A. Vazquez**  
Street Address (P.O. Box Number is Not Acceptable)  
**888 Brickell Avenue**  
City **Miami** **FL** Zip Code **33131**

8. 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 **Felix A. Vazquez V.P. Controller Finance**

**9/11/00**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **SVCO** ☐ Delete  
NAME **GRANJA, SANTIAGO**  
STREET ADDRESS **206 NE 2ND AVENUE**  
CITY-ST-ZIP **DANIA FL 33004**

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

TITLE **EVP** ☐ Delete  
NAME **ALVARADO, NELSON**  
STREET ADDRESS **9215 SW 71 AVE.**  
CITY-ST-ZIP **MIAMI FL 33156**

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

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

TITLE **VPF** ☒ Delete  
NAME **GONZALEZ, CHRISTINE**  
STREET ADDRESS **3900 SW 60TH AVE.**  
CITY-ST-ZIP **MIAMI FL 33155**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **EVP** ☐ Change ☒ Addition  
NAME **Manzanares, Javier**  
STREET ADDRESS **1229 Sorolla Avenue**  
CITY-ST-ZIP **Coral Gables, FL 33134**

TITLE **VPF** ☐ Change ☒ Addition  
NAME **Vazquez, Felix**  
STREET ADDRESS **325 Ocean Drive #605**  
CITY-ST-ZIP **Miami Beach, FL 33139**

TITLE **PCED** ☒ Change ☐ Addition  
NAME **Alvarado, Nelson**  
STREET ADDRESS **9215 S.W. 71 Avenue**  
CITY-ST-ZIP **Miami, FL 33156**

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
NAME ☐ Change ☐ Addition  
STREET ADDRESS ☐ Change ☐ Addition  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
**Felix A. Vazquez**  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9/11/00**  
Date

**(305) 648-8895**  
Daytime Phone #

CR2E034 (5/00)