Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000003506					FILED				
1. Entity Name INTERNACIONAL DE DIVISAS S.A., LLC					01 MAR -8 PM 4: 10				
	·						-		
Principal Plac	ce of Business	Mailing Address				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
260 CRANDO	E 32	LONIDA							
MIAMI FL 33	149-1540	MIAMI FL 33149-1540			,				
2. Principal Place of Business 260 CARUGON BULL, Swte 32-185 260 CARUGON				55765	[[[[[[[[[[[[[[[[[[[er iib biil (bb)	
760 (Suite, Apt.		Suite, Apt. #, etc.		N orther		DO NOT WRITE IN TH	IS SPACE		
City State C		City & State			4. FEI Number Applied For				
/V /A	mi Fr.	MIAMI	Fy.		65	-0996161	<u> </u>	t Applicable	∍
Zip 33/	49 USA	^{Zip} 33/49	Country	,	5. Certificate o	Status Desired	\$5.00 Add Fee Require		
	6. Name and Address of Current Re	gistered Agent			7. Name and A	ddress of New Registere	d Agent		7
SPIEGEI	& UTRERA, P.A.	y to sometime to	Name				······································	<u> </u>	_ -
343 ALMERIA AVENUE				Street Address (P.O. Box Number is Not Acceptable)					
CORAL	GABLES FL 33134								
		<u>.</u>	City			F	Zip Cod	9	٦
8. The above	e named entity submits this statement for the	ne purpose of changing its req	gistered office o	r registere	ed agent, or both,	in the State of Florida.			7
CICMATURE	:								
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Re	gistered Agent signal	beniuper eruf	when reinstating)	DATE			4
			/!!! FEE IS \$						
		Make Check Payal	ble to Depart	ment of	State				ļ
9.	MANAGING MEMBER		10.	,		ADDITIONS/CHANG			٦ٍ إ
TITLE NAME	MGR Ardila, Jorge A	☐ Delete	TITLE NAME		-		Change	☐ Addition	1
STREET ADDRESS	260 CRANDON BLVD., SUITE 32		STREET ADDRESS CITY-ST-ZIP	260	(C V W D O N	BLVD., SUITE	35-182		8
CITY-ST-ZIP	MIAMI FL 33149-1540 MGR	Delete	TITLE			;	Change	☐ Addition	- \ a
NAME	ARDILA, LUIS A	_ Build	NAME		00	BLVD, SUITE	35-182	- .	1
STREET ADDRESS CITY-ST-ZIP	280 CRANDON BLVD., SUITE 32 MIAMI FL 33149-1540		STREET ADDRESS CITY-ST-ZIP	500	CRUMPON	BC40, SUITE	36,104		l
TITLE	MGR	☐ Delete	TITLE				Change	Addition	1
NAME STREET ADDRESS	-SEPULVEDA, EFRAIN H 260 CRANDON BLVD., SUITE 32	•	NAME STREET ADDRESS	27.5	(RAND > N	BLYD, SUITE	32-185		. >
CITY-ST-ZIP	MIAMI FL 33149-1540		CITY-ST-ZIP	(100	(4110310				
TITLE		☐ Delete	TITLE NAME				☐ Change	☐ Addition	
NAME STREET ADDRESS			STREET ADDRESS		UU)OQQ3389.:		$\frac{1}{111}$	
CITY-ST-ZIP			CITY-SY-ZIP	<u> </u>		****50_00	<u> </u>	:0.00 <u> </u>	4
TITL <u>E</u> NAME		Delete	NAME]		**************************************	Change	Addition Addition	
STREET ADDRESS	\$ *		STREET ADDRESS						
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP			<u>!</u>	Change	☐ Addition	4
NAME		L_I Delete	TITLE NAME				∟j onange	□ MUUIION	1
STREET ADDRESS CITY-ST-ZIP	•		STREET ADDRESS CITY-ST-ZIP			1			
	pertify that the information supplied with the	s filing does not qualify for the		ted in Ser	ction 119.07(3)(i)	Florida Statutes, I further o	ertify that the in	formation	-
indicated	on this report is true and accurate and the bility company or the respirer or trustee er	at my signature shall have the	same legal effe	ct as if m	ade under oath: t	hat I am a managing mem	ber or manage	of the	{.

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE