	he purpose of changing it	Coun Coun Is registere	Name Street Addres City	4. FEI Nu 5. Certific 7. Name a ss (P.O. Box Nu	mber 59-15955(and Address of New mber is Not Acceptab	THIS S THIS S TH	PACE	plied For t Applicable d
Country d Address of Current Re- CIA B /E STE 221 bmits this statement for the inted name of registered agent and to satisfy its Intangible elects to do so.	Suite, Apt. #, etc. City & State Zip egistered Agent he purpose of changing it ittle if applicable. (NO FILE NOW	Is registere	Name Street Addres City ed office or regi	4. FEI Nu 5. Certific 7. Name a ss (P.O. Box Nu	DO NOT WF mber 59-15955(and Address of New mber is Not Acceptab	PITE IN THIS S 7 Registered A Ple) FL	PACE	plied For t Applicable d
d Address of Current Re CIA B /E STE 221 bmits this statement for the inted name of registered agent and to satisfy its Intangible elects to do so.	City & State Zip egistered Agent he purpose of changing it itile if applicable. (NO FILE NOW	Is registere	Name Street Addres City ed office or regi	5. Certific 7. Name (mber 59-15955(and Address of New mber is Not Acceptab)7 Registered A Je) FL	Ap No \$8.75 Addi Gee Required 	t Applicable litional d
d Address of Current Re CIA B /E STE 221 bmits this statement for the inted name of registered agent and to satisfy its Intangible elects to do so.	Zip egistered Agent he purpose of changing it title if applicable. (NO FILE NOW	Is registere	Name Street Addres City ed office or regi	5. Certific 7. Name (and Address of New	Registered A ole) FL	No \$8.75 Addi Fee Requirec .gent	t Applicable litional d
d Address of Current Re CIA B /E STE 221 bmits this statement for the inted name of registered agent and to satisfy its Intangible elects to do so.	he purpose of changing it title if applicable. (NO FILE NOW	Is registere	Name Street Addres City ed office or regi	7. Name (and Address of New	FL	Fee Required	d
CIA B /E STE 221 bmits this statement for th inted name of registered agent and to satisfy its Intangible elects to do so.	he purpose of changing it title if applicable. (NO FILE NOW)TE: Registere	Street Addres City ed office or regi	ss (P.O. Box Nu	mber is Not Acceptab	 FL	······	
/E STE 221 bmits this statement for th inted name of registered agent and to satisfy its Intangible elects to do so	title if applicable. (NO)TE: Registere	Street Addres City ed office or regi			FL	Zip Code	3
to satisfy its Intangible elects to do so.	title if applicable. (NO)TE: Registere	ed office or regi	stered agent, or	both, in the State of F		Zip Code)
to satisfy its Intangible elects to do so.	title if applicable. (NO)TE: Registere	ed office or regi	stered agent, or	both, in the State of F		Zip Code	3
to satisfy its Intangible elects to do so.	title if applicable. (NO)TE: Registere		stered agent, or	r both, in the State of F			
OFFICERS AND DI	Make Check Paya	able to De	epartment of s		Trust Fund Contribut			to Fees
IERTO B7 AVE.		TITLE NAM STRE	e Et address	ADDITIO			Change	Addition
Berto 7th ave	Delete	NAM	e Eet address				Change	Addition
		~ NAM Stre	E Et address				Change	Addition
	Delete	NAM	e Et address				Change	Addition
¥	Delete	NAM STRE	ie Eet address				Change	Addition
10 <u>-</u>	Delete	NAM	e Eet address				Change	Addition
	ERTO TH AVE	ERTO TH AVE	CITY ERTO TH AVE Delete TITL NAM STRE CITY TITL NAM STRE CITY Delete TITL NAM STRE CITY STR	CITY-ST-ZIP ERTO TH AVE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP DELE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREETADDRESS CITY-ST-ZIP TITLE NAME STREETADDRESS CITY-ST-ZIP TITLE NAME STREETADDRESS CITY-	CITY-ST-ZIP ERTO TH AVE Delete Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP EERTO TH AVE Delete TITLE NAME STREET ADORESS CITY-ST-ZIP DELE DELE DELE STREET ADORESS CITY-ST-ZIP DELE DELE STREET ADORESS CITY-ST-ZIP DELE STREET ADORESS CITY-ST-ZIP DELE STREET ADORESS CITY-ST-ZIP DELE DELE STREETA	CITY-ST-ZIP ERTO Delete TITLE Change CITY-ST-ZIP CITY

Attachment 469357 759/61

Law Office MARCIA B. CABALLERO **Professional Association**

2450 Southwest 137th Avenue Suite 221 Miami, Florida 33175 Telephone (305) 553-8020 Telecopier (305) 226-3740

i

١.

April 17, 2001 Tuesday

~

<u>.</u>~

Annual Report Filings Division of Corporations Annual Reports Post Office Box 1500 Tallahassee, Florida 32302-1500

RE: INTERNATIONAL PROPERTIES, INC Document Number 469357

Gentlemen:

Please find enclosed the Corporate Annual Report for the above-described corporation together with check in the sum of \$150.00 to cover your filing fee.

Sincerely,

Ari Quilez.

Secretary for MARCIA B. CABALLERO, ESQ.

Enclosures