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PROFIT CORPORATION ANNUAL REPORT 1999

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State.

DIVISION OF CORPORATIONS

Mar 10, 1999 8:00 am **Secretary of State**

03-10-1999 90020 007 ***150.00

FILED

1. Corporation Name INTERNATIONAL INVESTORS REALTY INC., OF MIAMI Principal Place of Business Mailing Address 330 S.W. 27TH AVE. 330 S.W. 27TH AVE. SUIET 408 SUITE 408 DO NOT WRITE IN THIS SPACE MIAMI FL 33135 MIAMI FL 33135 3. Date Incorporated or Qualifed 12/08/1975 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-1690881 Not Applicable 26 21 \$8:75 Additional Suite, Apt. #, etc. --Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes the current year Intangible ☐ Yes 30 Personal Property Tax. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ARTZE, ENRIQUE R Street Address (P.O. Box Number is Not Acceptable) 330 S.W. 27TH AVE. **SUITE 408** 83 **MIAMI FL 33135** Zip Code 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Change 11 TITLE TITLE ARTZE, ENRIQUE R. 1.2 NAME NAME 330 S.W. 27TH AVE., SUITE 408 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CiTY-ST-ZIP Addition ☐ DELETE ☐ Change 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIF ☐ DELETE 4.1 TITLE ☐ Change □ Addition TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE Change ☐ Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 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 of supplemental annual report is rue 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cha all other like empowered.

OFFICER OR DIRECTOR

6.4 CITY-ST-ZIP

SIGNATURE: