

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

FILED

Jan 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 508622 (8)  
1. Corporation Name  
FOREIGN INVESTMENTS CONSULTANTS CORPORATION



Principal Place of Business  
300 SEVILLA AVENUE  
SUITE 301  
CORAL GABLES FL 33134

Mailing Address  
300 SEVILLA AVENUE  
SUITE 301  
CORAL GABLES FL 33134-6624

3. Date Incorporated or Qualified  
06/09/1976

3a. Date of Last Report  
03/26/1996

4. FEI Number  
59-1672956

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

9. Name and Address of Current Registered Agent

CASTRO, CARLOS ALBERTO  
1001 SOUTH BAYSHORE DRIVE  
24TH FLOOR WEST, BAYSHORE DRIVE  
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  
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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	DELETE
NAME	CASTRO, GAUDENCIO E.	
STREET ADDRESS	844 MALAGA	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	P	DELETE
NAME	CASTRO, GAUDENCIO, JR.	
STREET ADDRESS	731 SANTURCE AVE.	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	T	DELETE
NAME	CURBELO, ROBERTO	
STREET ADDRESS	300 SEVILLA	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	S	DELETE
NAME	CASTRO, CARLOS ALBERTO	
STREET ADDRESS	1001 S. BAYSHORE DR.	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	DELETE
NAME	CASTRO, JOSE L.	
STREET ADDRESS	1531 CONSOLATA AVE.	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 supplemental 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.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97 305-448-6707  
Date Daytime Phone #

CR2E034 (9/96)