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Mar 20 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 # 529088 (7)
1. Corporation Name
INTERAMERICAN REALTY SERVICES, INC.



Principal Place of Business

6043 NW 67TH ST
MIAMI FL 33166

Mailing Address

8043 NW 67TH ST
MIAMI FL 33166-2731

3. Date Incorporated or Qualified

04/01/1977

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-1747334

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

9. Name and Address of Current Registered Agent

BARRUETA, RAFAEL
3111 S.W. 115TH AVENUE
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.04(2) 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, and further certify and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(If not a registered agent, the signature of the corporation is required when registering)

(If not a registered agent, the signature of the corporation is required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME PD BARRUETA, RAFAEL
2. STREET ADDRESS 3111 S.W. 115TH AVE.
3. CITY, ST, ZIP MIAMI FL
4. NAME SD BARRUETA, SURMA
5. STREET ADDRESS 3111 S.W. 115TH AVE.
6. CITY, ST, ZIP MIAMI FL
7. NAME
8. STREET ADDRESS
9. CITY, ST, ZIP
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. NAME
14. STREET ADDRESS
15. CITY, ST, ZIP
16. NAME
17. STREET ADDRESS
18. CITY, ST, ZIP
19. NAME
20. STREET ADDRESS
21. CITY, ST, ZIP
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP
25. NAME
26. STREET ADDRESS
27. CITY, ST, ZIP
28. NAME
29. STREET ADDRESS
30. CITY, ST, ZIP

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP
21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP
25. TITLE
26. NAME
27. STREET ADDRESS
28. CITY, ST, ZIP
29. TITLE
30. NAME
31. STREET ADDRESS
32. 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 included 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 registered agent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name
appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Month/Year

0228057

CR2E034 (9/96)