2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

561385 **DOCUMENT #**

1. Entity Name INTERAMERICAN MARKETING, INC.



Jan 15, 2003 8:00 am Secretary of State 01-15-2003 90273 018 ***150.00 **FILED**

Principal Pla 4050 N.45TH HOLLYWOOD US	ce of Busines /AVE	s Leg	"是是"和	Mailing Address 4050 N. 45TH AVE HOLLYWOOD FL 33021								
	Dinner of D	-	*									
2. Principal Place of Business				3. Mailing Address				1 IROSUL UNISU DILOS (IROU (NIUL SULO) I	ILDO MEMAN MAR	Y DEBA BIDI	81811 8 1811 1887	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State			4. FEI Number 59-2610641			-	Applied For	
Zip · Country			Zip		Country		5. Certificate of Status Desired			Not Applicable .75 Additional		
	6. Name	and Address	of Current Reg	istered Agent				Name and Address of New Reg	<u> </u>	ee Requir gent	ed	$\frac{1}{2}$
LEWIS, KI	enneth G.			Name				<u>.</u>]
4050 NORTH 45TH AVENUE					Street Address (P.O. Box Number is Not Acceptable)							
HOLLYWOOD FL 33021]	
9 The chave	named antib					City			FL	Zip Coo		
line obligat	tions of regist	y submits this s ered agent.	statement for the	purpose of changing i	ts register	ed office or register	ed ag	ent, or both, in the State of Florida	a. I am fa	miliar with,	, and accept	
SIGNATURE .	Signature, typed	or printed name of re	egistered agent and titl	e if annlicable /NC	TE: Basislava	4 A						
F		! FEE IS \$1		o wappiicable. (140	DIE: Registere	d Agent signature required	when re	einstating)	DATE			-
Afte	r May 1, 200	3 Fee will be		ta				 Election Campaign Finance Trust Fund Contribution. 	cing 🔲		00 May Be d to Fees	
10.			CERS AND DIRE	ľ	11.		AD	DITIONS/CHANGES TO OFFICE	RS AND D	DIRECTOR	S IN 11	-
TITLE NAME	PD Lewis, Ke	nneth G.		☐ Delete	TITLE					Change	Addition	(10/02)
STREET ADDRESS 4050 N. 45TH AVENUE HOLLYWOOD FL				STRE		ET ADDRESS						
TITLE	TIOLETTO	0016		□ Delete	TITLE	ST-ZIP				Change	Addition	R2E034
NAME STREET ADDRESS	RESS			NAM STR		l l			·	_ change	Addition	٥
CITY-ST-ZIP					1	ST-ZIP						
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STREET ADDRESS CITY-ST-ZIP					STREE	T ADDRESS ST-ZIP						
TITLE				☐ Delete	TITLE	01-211				Change	☐ Addition	
NAME STREET ADDRESS					NAME STREE	T ADDRESS				•		
CITY-ST-ZIP						ST-ZIP						
TITLE NAME				☐ Delete	TITLE NAME					Change	Addition	
STREET ADDRESS CITY-ST-ZIP					STREE CITY-:	T ADDRESS						
TITLE	***	- 111		☐ Delete	TITLE	31-ZIF				Change	Addition	
STREET ADDRESS					NAME STREE	ADDRESS			_			
CITY-ST-ZIP		 			ÇITY-S	ST-ZIP				-		
of the corp	oration or the	receiver or tru	istee empowerer	ling does not qualify fo and accurate and that r d to execute this report I other like empowered	as require	ption stated in Sec re shall have the sa d by Chapter 607,	tion 1 ame le Florida	19.07(3)(i), Florida Statutes. I furt gal effect as if made under oath; a Statutes; and that my name ap;	her certify that I am bears in B	that the in an officer of lock 10 or	formation or director Block 11 if	
SIGNATI	URE:/ <u>/</u> 2	eine	Water	EREKENIA NAME OF SIGNING OFFICER	ひこうみ	6. LEU	//5	1/13/2003 9	549	83 /	500	
		JOHN TONE AND	LD ON PRINTED	MANG OF BIGHING OFFICER	OH DIRECTO	н		Pate	Daytin	ne Phone #		