

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

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 605535 (4)
1. Corporation Name
INTERNATIONAL ALLIED ASSOCIATES CORPORATION



Principal Place of Business 1424 NW 82ND AVE BOX 2268 MIAMI FL 33126 US	Mailing Address 1424 NW 82ND AVE BOX 2268 MIAMI FL 33126 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8550 N.W. 70 ST. Suite, Apt. #, etc 22 City & State 23 MIAMI FL Zip 33166 Country USA		2a. Mailing Address 26 8550 N.W. 70 ST. Suite, Apt. #, etc 27 City & State 28 MIAMI- FL Zip 33166 Country USA		3. Date Incorporated or Qualified 12/29/1978	
		4. FEI Number 59-1913648		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent FENTE, MANUEL F 1835 W. FLAGLER ST. SUITE 201 MIAMI FL 33125		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 FL	
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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 title, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input checked="" type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	METZ, ROBERT S.		12 NAME		
STREET ADDRESS	8231 S.W. 39TH CT.		13 STREET ADDRESS		
CITY-ST-ZIP	DAVE FL		14 CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FERNANDEZ, HELENA		22 NAME		
STREET ADDRESS	10300 S.W. 50 TERR.		23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		24 CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> DELETE	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HERNANDEZ, ARNALDO		32 NAME	PRESIDENT	
STREET ADDRESS	C PETARE QTA "ARTEJU"		33 STREET ADDRESS	ARNALDO C. HERNANDEZ	
CITY-ST-ZIP	CARACAS, VENEZUELA		34 CITY-ST-ZIP	15582 S.W. 137 PL.	
TITLE		<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 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 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: *Helena Hernandez* 2-20-98 305-717-0902

CR2E034 (10/97)