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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 664847

(1)

INTERSTATE INVESTMENT COMPANY

FILED
Jun 06 1997 8:00am
Secretary of State

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Principal Place of Business		Mailing Address	Mailing Address			[460(10 0)110 0(1)1 0(0)1 (0)11 0(1)11 (1)11					
2001 BISCAYNE BLVD P.O. BOX 970308		P O BOX 370308	2601 BISCAYNE BLVD P O BOX 370308								
MIAMI FL 8313	FL 83197 MIAMI FL 33197-0308			3. Date Incorporated or Qualified							
2. Principal P	lace of Busine	ess	2a. Mailing Addre	ss			4. FEI Number	1.00,	1	Applied For	;
21		26	1			59-1987116 Not Applicab				ible	
I Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	5. Certificate of Status Desired				
22 City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be				-	
23			28				Trust Fund Contribution			led to Fees	
. Zip	Country Zip Country			'	8. This corporation has liability for			er s. 199.032	,]		
24		26	29 urrent Registered Agent	30			Florida Statutes 10. Name and Address of New R	Yes [
^1			urrent negistered Agent		81	Name		ahistatan	Agent		
CAIT	RNS, TERRA 1 BISCAYNE	INCE V.	•			AN.	ITONIO RODRIGUEZ				
	MI FL 33137				62	Street Ac	dress (P.O. Box Number is Not Accepte 501 BISCAYNE BLVD.	.ble)			
PHICH	mi 1 E 00 101				83				·		一
					84	Carr			7057	Zin Codo	
		_					AMI	FL		Zip Code 33137	
11, Pursuant	to the provier	ns of Sections 607	0502 and 607.1508, Florid	Statutes, the	above	e-named co	orporation submits this statement for the ration's board of directors. I hereby acce	purpose of	changir	ng its register	red
agent. I a	m janilia vij	, and accept the	philigations of Section 607.0	505, Florida S	Statutes	7 the corpo 8.	ration's board of directors. Thereby accu	ipi ine app		i as registere	ا
SIGNATURE	<u> Mito</u>	r printed name of register	od appli and little if applicable	(NOTE: Regulat	no here!	ool signature re	quited when reinstating)	10/2/	97		_
12.	2-41-210-0: 171-00-0	OFFICERS	S AND DIRECTORS		3.	on dignization of	ADDITIONS/CHANGES TO OFF	CERS AND	DIRECT	TORS IN 12	
TITLE	DS		☐ DEL	ETE 1.	1 TITLE				Chan		ition
NAME	POLLACK			1.2	2 NAME						
STREET ADDRESS		CAYNE BLVD		1.3	3 STREET	ADDRESS					
CITY-ST-ZIP	MAMI FL				4 CITY - S	T-21P					
TITLE	P	., .,	☐ DEL	ETE 2.	1 TITLE				L Chan	ige 🔲 Addi	ition
NAME				2.2 NAME						- 1	
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STREET ADDRESS				4.3	3 STREET	ADDRESS					
CITY-ST-ZIP					4 CHY-S	T - ZIP			<u> </u>		
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NAME					2 NAME						
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CITY-ST-ZIP TITLE			☐ DEL		4 CHY-S 1 TITLE	1 - ZIP			Chan	ige Addi	ition
NAME			ب الماد		2 NAME					-a,()	
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					4 CITY - S					•	
14. I do heret	by certify that	the information su	pplied with this filing does n	ot qualify for t	he exe	mption stat	ted in Section 119.07(3)(i), Florida Statut	es. I furthe	certify t	hat the	
I am an o	fficer or direct	tor of the corporati	on or the receiver or trustee	empowered t	d accu	arate and the oute this rep	hat my signature shall have the same lectorit as required by Chapter 607, Florida	ai ettect as Statutes; a	i i made nd that n	under oath; ny name	inat
appears i	in block 12 öf	RIDCK BY CUSDA	ed; or on an attachment with	an address.							- 1