

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90032 004 ****61.25

DOCUMENT # 753515

1. Entity Name

INTERNATIONAL AFFILIATION OF INDEPENDENT ACCOUNT

Principal Place of Business

Mailing Address

9200 S. DADELAND BLVD.
 #510
 MIAMI FL 33156-2703

9200 S. DADELAND BLVD.
 #510
 MIAMI FL 33156-2713

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1819130

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOESSEL, ARTHUR D
 9200 SO DADELAND BLVD
 STE 510
 MIAMI FL 33156

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME GOESSEL, ARTHUR D.
 STREET ADDRESS 9200 S. DADELAND BLVD, SUITE 510
 CITY-ST-ZIP MIAMI FL 33156

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME HALLY, GRANT
 STREET ADDRESS 67 CUSTOMS ST. EAST, PO BOX 3685
 CITY-ST-ZIP AUCKLAND 1 NE

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME STEVENS, GREGORY
 STREET ADDRESS FELIX BOIX, 14, ENTREPLANTA, DRCHA
 CITY-ST-ZIP MAGRID SP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME CUTHILL, R.W.
 STREET ADDRESS 1941 LEE ROAD
 CITY-ST-ZIP WINTER PARK FL

TITLE Change Addition
 NAME PLOTKIN, ROCHARD A.
 STREET ADDRESS 130 BELLEVUE AV., NEWPORT, RI
 CITY-ST-ZIP 02840

TITLE Delete
 NAME FRAME, DAVID
 STREET ADDRESS 2 CANARY WHARF
 CITY-ST-ZIP LONDON, ENGLAND 00000

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME RIVERA, NORBERTO A
 STREET ADDRESS HUATABAMPO 38, COL. ROMA SUR, MEXICO D.F.
 CITY-ST-ZIP MEXICO 06760

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arthur D. Goessel 3/15/00 305 670 0580
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CPRE097 (0/00)