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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9500000571 (8)

INTERU	NION FINANCIAL CORPORA	ATION						
Principal Place of Business Mailing Address							H WARIE BUIEG BUIGH WIIRI EU	### HUL 104
249 ROYAL PA SUITE 301-H PALM BEACH I		249 ROYAL PALM WAY Suite 301-H Palm Beach Fl 33480-4302					,	
						3. Date Incorporated or Qualified 02/02/1995	3a. Date of Last 05/10/1996	
2. Principa! Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				87-0520294		Not Applicable
Suite, Apt. #, etc			Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State		City & State				6. Election Campaign Financing		
23		28				Trust Fund Contribution		May Be
Zip	Country	Zip	C	ountry	/	8. This corporation has liability for		
24	25	29	30	_			Yes IV No	0. 100.002
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered Agent	
GAR	IY, T. JACK III			81	Name			
	ROYAL PALM WAY			82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)	
PALI	M BEACH FL 33480				i			
ı				83	}		•	1
				84	City		85 Zi	Code
					<u> </u>			
11. Pursuant t	to the provisions of Sections 607.050;	2 and 607.1508, Florida of Florida, Such change	Statutes, the	abov ed by	e-named corp	poration submits this statement for the prior's board of directors. I hereby acception's	ourpose of changing	its registered
agent La	ni familiar with, and accept the obliga	ations of, Section 607.05	05, Florida S	tatute	\$.	active poure of anticipies, thorough according	pri a oppositione i	a registores
SIGNATURE			ALOYE D				DATE	
12.	Signature, typed or printed name of registered age OFFICERS AND		(NOTE: Regist		ent signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFFIC		RS IN 12
THILE				1.1 TOLE			☐ Change	(
NAME	BENARROCH, GEORGES			NAME	1			
STREET ADDRESS 130 ADELAIDE ST W., SUITE 3303, TORONTO					ADDRESS			18
CITY - ST - ZIP	ONTARIO, CANADA	,		CITY-S	- 1			
TITLE	D	DELE		TITLE			☐ Changi	Addition
NAME	GLOVER, ANN			NAME				ļ
STREET ADDRESS	130 ADELAIDE ST. W., SUITE	3303	2.3	STREET	r address	-		<u></u>
Cify-S1-ZiP	TORONTO, ONTARIO M5H 3P!		2	4 CITY-:	S1 - ZIP	-		
1171.F	D	DELE	TE 3.*	TITLE			Changi	Addition
NAME	BOLENS, KAREN LYNN		3.3	NAME				
STREET ADDRESS	10 RUE PIERRE-FATIO		3.3	STREET	ADDRESS	•		<u> </u>
CITY-ST-ZIF	GENEVA, SWITZERLAND			. CITY-	ST-ZIP			
THLE	D	DELE:	TE 41	TITLE	j		Change	Addition
NAME	DE STADELHOFEN, JACQUES	MEYER	4.	2 NAME				ì
STREET ADDRESS	10 RUE PIERRE-FATIO		4.3	STREET	T ADDRESS			
CHTV - ST - ZIP	GENEVA, SWITZERLAND			CITY-S	ST-ZIP	The control of the same of the		
TOLE	\$	DELE		TITLE			☐ Change	☐ Addition
NAME	GARY, T. JACK III			NAME				İ
STREET ADDRESS	250 ROYAL PALM WAY				T ADDRESS			j.
CHY-ST-ZiP	PALM BEACH FL 33480	DELE		CITY-S	ST-ZIP		Change	Addition
TITLE		L_1 DELE		TITLE			L unange	Addition
NAME			■ 6.1	NAME				
STREET ADDRESS			•		T ADDRESS			İ

SIGNATURE:

Lam an officer or director of the appears in Block 12 or Block 13

14. I do hereby certify that the information supplied with this filling 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 secturate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or further empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if grianged, or on an attachnized with the appears in Block 12 or Block 13 if grianged, or on an attachnized with the appears.

FILED

Apr 28 1997 8:00am

Secretary of State