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COVER LETTER

Amendment Section Division of Corporations SUBJECT: INTER-AMERICAN TECHNOLOGIES, CO. (Name of Corporation) DOCUMENT NUMBER: F96000000486 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pedro R. Suarez (Name of Contact Person) Inter-American Technologies, Co. (Firm/Company) 3570 NW 62nd Street (Address) Miami, FL 33147-7538 (City/State and Zip Code) For further information concerning this matter, please call: Pedro R. Suarez (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Street Address: **Mailing Address:** Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S ange is submitted for a corporation organized under the laws of the State of _ ler to change its registered office or registered agent, or both, in the State of Fl	Florida	his	_
1. The name of	the corporation: Inter-American Technologies, Co.			
2. The principal	d office address: 3570 NW 62nd Street, Miami, FL 33147-7538			<u></u>
3. The mailing	address (if different):			
4. Date of incor	rporation/qualification: 01/29/1996 Document number: F96000	000486	3	
	nd street address of the current registered agent and registered office on file wit artment of State:	h the		
	Corporation Service Company	-		
	1201 Hays Street		_	٠.
	Tallahassee, FL 32301-2525	SECR	06 MAY	erecone)
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered offi	HASSEE	8	(1)
	Pedro R. Suarez)F ST FLC	AM 8:	
	3570 NW 62nd Street	ATE ORIO	22	C. T. C. C.
	(P.O. Box NOT acceptable) Miami, FL 33147-7538			
The street addr as changed wil	ress of its registered office and the street address of the business office of its libe identical.	s register	ed age	ent,
Such change wauthorized by	was authorized by resolution duly adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.	officer s	o	
Signa	Pedro R. Suarez (Printed or typed name and t	itle)		_
I hereby accep I further agree of my duties, a document is be corporation h	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and comind I am familiar with and accept the obligation of my position as registered in the registered office address, I hereby been notified in writing of this change.	iplete pei d agent. sy confiri	rforma Or, if n that	ince this the
(S	Signature of Registered Agent) (Date)		<u> </u>	
,	pehalf of an entity:			
	(Typed or Printed Name)			•

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *